



Five Year Plan to End Homelessness Among Veterans in King County

May, 2011

Acknowledgements

In an effort to capitalize on the excellent work being done nationally and locally to support the reintegration needs of veterans, this report relies on information provided by veterans, veteran's agencies, and housing and supportive service providers throughout King County. This report has been influenced by several important resources including:

- The many veteran and homeless housing providers in King County
- The previous and ongoing work of the Committee to End Homelessness in King County
- The work done by the U.S. Department of Veterans Affairs, United States Interagency Council on Homelessness, VA-Puget Sound Healthcare Systems, and Washington State Department of Veteran Affairs
- Veterans, themselves, who participated in a series of focus groups hosted by King County Department of Community and Human Services.

A list of individuals who participated in the Veterans Five Year Plan advisory group and key informants who provided background research is available in Appendix E.

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The Five Year Plan to End Homelessness among Veterans in King County

Introduction

The Five Year Plan to End Homelessness among Veterans in King County was developed at the direction of the Funders Group of the Committee to End Homelessness in King County (CEHKC), in alignment with each of the federal, state and local five year plans to end veteran homelessness recently developed by the U.S. Department of Veterans Affairs (VA), United States Interagency Council on Homelessness (USICH), VA-Puget Sound Healthcare System (VA-Puget Sound), and Washington State Department of Veteran Affairs (WDVA).

This five year plan is purposefully brief, with the background research and data that informed the discussions and recommendations of the advisory group available in a series of appendices found at the end of this report. It is centered around four goals:

- **Close the Housing Gap for Homeless / At-Risk Veterans.** Build or acquire 610 - 770 units of housing needed by currently homeless veterans, using a mix of capital development and housing vouchers, and engage mainstream systems in providing this housing and services.
- **Secure adequate funding and work with partners towards system alignment, with an emphasis on exploring efficiencies and reducing duplication of service.** Review and advocate for funding opportunities at the federal, state and local level in support of ending veteran homelessness. Align strategies and funding priorities wherever possible in support of homeless housing and services for veterans and their families.
- **Address complex needs among veterans, starting with outreach and prevention.** 1,000 newly discharged veterans will return to the Puget Sound for the foreseeable future. Approximately 300 of these will be in need of transition education, counseling (financial/education/employment, income, benefits), treatment (physical/mental health/chemical dependency/trauma/PTSD) and diversion (jail/treatment). Approximately 100 of these will be at high risk of becoming homeless unless focused prevention strategies are implemented.
- **Identify and Replicate Best Practice Models for Serving Veterans.** Create a clear vision for veteran housing and homeless services, and align partner efforts towards ending veteran homelessness. Use data to drive this systems change, including enhanced data collection and analysis to understand veteran needs and services.

The plan is intended to offer guidance to local policy makers on emerging needs of veterans and their families, challenges our systems face in responding to those needs, and changes needed to align efforts and strengthen veteran supports.

Executive Summary

Nearly 131,000 veterans call King County home. Approximately 1,000 to 1,150 of these veterans are homeless, per the 2010 point in time census of homeless individuals, the majority of whom are from the Vietnam era. Among this cohort, we anticipate a growing need for housing and services related to aging and disabilities. Our community is now preparing for a new generation of veterans from Operation Iraqi Freedom in Iraq (OIF) and Operation Enduring Freedom in Afghanistan (OEF). Concerns run high that these veterans are going to face many challenges when they come home to our region and will need community support to reintegrate

to civilian life. Local planners anticipate that King County will see the addition of at least 100 newly-homeless OIF/OEF veterans and their families each year for the foreseeable future if preventative steps are not taken.

Challenges remain, however, in meeting the needs of veterans and their families. The main challenge facing the region is obtaining adequate resources and aligning federal, state and local policy and resources in support of ending veteran homelessness. Other challenges that need to be addressed include understanding and preparing for the changing demographics of homeless and at-risk veterans, and responding to the existing level of need for housing and services among currently homeless veterans.

To respond to these challenges, an advisory group was convened by King County Department of Community and Human Services (KC DCHS) on behalf of CEHKC, and made up of representatives from local community housing and service providers, public agencies, funders, and state and local veteran agencies, as well as veterans themselves. The result of their work, *The Five Year Plan to End Homelessness among Veterans in King County* outlines a set of overarching goals for ending homelessness among veterans, with the understanding that implementation of these strategies will depend on collaboration among all levels of government and across all sectors.

The advisory group of the Five Year Plan to End Homelessness among Veterans in King County recommends the following priorities and system enhancements:

1. **Close the Housing Gap for Homeless / At-Risk Veterans.** 610 to 770 units of housing are needed among currently homeless veterans. This housing gap is expected to increase by approximately 100 per year among newly returning veterans face considerable challenges reintegrating to civilian life. The housing gap should be addressed by a combination of the following:
 - A. Increased development of housing and services dedicated to veterans and their families, using a mix of capital funds and housing vouchers.
 - B. Align regulations and priorities among VASH, Grant Per Diem and local capital housing dollars.
 - C. Match the level of need with the level of service and type of housing to assure that scarce resources are targeted towards the appropriate households.
 - D. Develop and use of interim housing strategies to engage and rapidly re-house homeless veterans and put them on the path towards housing stability.
2. **Secure adequate funding and work with partners towards system alignment, with an emphasis on exploring efficiencies and reducing duplication of service.** The system of housing and supportive services available to veterans is complex. Many veterans, as well as housing and service providers, note that not only are there not enough services and housing, it is difficult to access those services that do exist. Opportunities to streamline and improve services to veterans include:
 - A. *Advocate for additional resources and support changes in federal, state and local policy and remove barriers to effective services among veterans.*
 - Advocate for additional funding at the federal state and local level even during this time of budget reductions to government funding, and apply for grant funding as resources become available.

- Align regulations and policies across existing and newly acquired fund sources.
 - Advocate for reinstatement of federally-funded monthly stipends during school breaks under the GI Bill for veterans who are enrolled in community colleges and universities.
- B. *Use a coordinated approach for housing and services.* Move towards a ‘coordinated referral’ approach to assure that veterans are quickly and effectively matched with the appropriate housing and services, whether within the VA, WDVA or local provider system. Develop and use common assessment elements across the system to match the level of need with the level of service and assure that scarce resources are targeted towards the appropriate population. Explore opportunities to create efficiencies and reduce duplication of service.
- C. *Build capacity among all agencies serving veterans* so case managers and program staff have the skills they need to best support veterans, as well as understanding of the unique challenges faced by the newly returning veterans.
- D. *Enhance data collection* so more is known about the challenges faced by veterans and the outcomes of the services being provided for veterans.
3. **Address complex needs among veterans, starting with outreach and prevention.** The current generation of newly returning veterans face unique challenges that require tailored approaches if we are to prevent an increase in homelessness among veterans and their families. It is recommended that:
- A. Local partners respond with intensive community outreach and services specifically targeted to the needs of these veterans, with a strong element of peer support.
 - B. Prevention strategies, such as emergency rental assistance or routine assessment among recently discharged personnel for PTSD, MST, TBI and other risk factors, be enhanced to better identify veterans at risk of becoming homeless and direct them to appropriate services.
4. **Identify and Replicate Best Practice Models for Serving Veterans.** Best practice models need to be developed and funded which take into account the differing needs of the aging veteran population as well as the newly returning veterans. Strengthen data collection and analysis across the system to drive system change towards ending veteran homelessness. Evaluate local demonstration projects to identify their impact and replicable practices. Create and implement a funding plan to bring effective strategies to scale.

King County is fortunate to have a nationally-recognized network of veteran-focused outreach, health care, treatment, case management, employment, legal and housing related services, as well as other specialty services for veterans. The majority of services are funded, or directly provided, by the VA, the WDVA and the King County Veterans Program (KCVP). In addition, many experienced community based organizations provide vital services to veterans, and are critical partners in reaching veterans who do not typically access government-affiliated programs. Working together, these partners can end veteran homelessness in King County.

King County Veterans and the Challenges They Face

Nearly 131,000 veterans call King County home. The largest cohort of veterans (just over 50,000) is from the Vietnam War era. The second largest cohort is those who served during the Gulf War in the 1990's. A third cohort is older veterans aged 75 and older who served during World War II or the Korean War. Our community is now preparing for the return of its newest group of veterans, those from Operation Iraqi Freedom (OIF) in Iraq and Operation Enduring Freedom (OEF) in Afghanistan.

Today's military, with its reliance on an all-volunteer military, has seen a steady decline in the number of men serving in the armed forces while women are making up a larger percentage than ever before. At the same time, the demands placed on both men and women in the armed forces have increased given the need to stretch resources under the Global War on Terror. Due to the strain of long and multiple tours of combat duty for those in the military in recent years, concerns run high that OIF/OEF veterans are going to face many challenges when they come home to our region and will need community support.

Returning to civilian life offers considerable challenges for many veterans, including finding or retaining employment and securing affordable housing. The national unemployment rate for post 9/11 veterans is 11.3 percent overall, 18 percent for those recently separated from the military, and up to 21 percent for younger veterans ages 18 to 24.

Many veterans are also affected by mental health and service-related trauma. It is estimated that up to 19 percent of Iraq and/or Afghanistan war veterans experience a mental health problem, and among veterans who are homeless, up to 45 percent suffer from a mental illness. Substance abuse is also a very serious concern among veterans who are homeless. Studies show that up to 70 percent of homeless veterans suffer from substance abuse problems, with considerable overlap between mental illness and substance abuse disorders.

When looking at the overall veteran population in King County, the following characteristics are worth noting:

- The veteran population, as a whole, is aging.
- The percentage of King County residents who are also veterans is declining, due in large part to the aging of this population.
- Even as the overall percentage of veterans is declining, the percentage of female veterans is growing.
- The military experience among veterans varies significantly depending upon the era in which they served.
- An individual's experience in the military appears to directly affect reintegration to civilian life. Newly returning veterans from OIF/OEF face significant challenges, which the current system is only now gearing up to address. Specific challenges faced by veterans include:
 - Mental health concerns, including post traumatic stress disorder and military sexual trauma
 - Disabilities acquired as a result of military service, including traumatic brain injuries and chronic pain issues
 - Substance abuse and chemical dependency
 - Eligibility for benefits, depending on military discharge status

- An increased incidence of domestic violence
- Increased rates of unemployment, particularly among recently returning vets
- Increased need for legal assistance, for issues such as outstanding warrants and child support orders
- An increased incidence of homelessness, especially among single adult males.

Background research and documentation of the incidence and prevalence of these concerns is available in Appendix A: Veterans Needs, Housing and Services in King County, provided as a web link to an online document.

Homeless Veterans in King County

Homelessness is an especially important consideration when looking at the challenges and barriers faced by veterans, hence the call by all levels of government serving homeless veterans to develop and align five year plans to end veteran homelessness. According to local sources, up to 21 percent of all homeless single adults in King County are veterans, with an estimate of 1,000 to 1,150 homeless veterans in our region, and about 27 percent (270 to 310) being chronically homeless. Most of these homeless veterans are single and male, with an average age of 50 (e.g., individuals who served during the Vietnam War era). Single homeless female veterans make up nearly 4 percent of those living in shelters and transitional housing.

Safe Harbors, the local Homeless Management Information System (HMIS) in King County, reports that veteran families account for approximately 3 percent of all homeless families in shelters and transitional housing in King County each year (representing approximately 30 households with 105 individuals.) This is likely an under representation, as many homeless veteran families are known to be doubled up with friends or family, or living in vehicles, and hence are not enrolled in Safe Harbors partner programs. The Homeless Care Line through the VA-Puget Sound reports they are hearing from approximately 10 homeless families per month.

Based on a 2010 landscape study of permanent housing units set aside for veterans, coupled with housing subsidy programs available, the gap in permanent housing for currently homeless veterans in King County is estimated to be in the range of 610 to 770 units, of which 165 to 207 units is the estimated gap for chronically homeless veterans. The housing gap is derived from adding the annual allocation of HUD/VA housing vouchers (approximately 150) and the 261 aside units for homeless veterans that have come online since the inception of the Ten Year Plan and subtracting from the estimated number of currently homeless veterans in King County. The housing gap does not account for those who may become newly homeless as veterans return to King County from Iraq or Afghanistan.

It is estimated that the number of homeless veterans and veteran families is anticipated to grow by about 100 households per year as veterans from OIF and OEF struggle to reintegrate to civilian life. The demographics of this cohort will be vastly different from the older single adult males who are currently homeless. This figure is based on the understanding that approximately 1,000 OIF/OEF veterans return to King County each year and will continue to do so for the foreseeable future. These veterans face a range of physical traumas, mental health concerns, and chemical dependency issues as a result of the unprecedented length of their multiple deployments. The WDVA notes that nearly 50% of OIF/OEF veterans are reservists, or “citizen-soldiers”, two-thirds of whom (64%) are married and come home to families, bringing additional

reintegration challenges for the entire family. (Just under half (49%) of career military are married.

Despite the critical need for services among this group, there appears to be a lag time in their seeking services. Most veterans first try to solve their problems on their own with the assistance of family and friends. Only when those resources are exhausted do they seek community resources. Recent reports from the WDVA are that 33 percent (or 333 of the 1,000) of OIF/OEF veterans in the Puget Sound region receive VA medical benefits for Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), depression or anxiety, which are typically indicators of being at risk for homelessness. Of the group that eventually seeks VA-specialty services, it is estimated that most do not seek services until nearly four years after initial discharge. The WDVA and VA have recently initiated prevention services to reach this cohort. Pending these programs ability to acquire full funding and going to scale, however, planners anticipate that approximately one-third of the group that eventually seeks services will become homeless, thus increasing the housing gap by 100 units per year unless strong prevention steps are taken.

This estimated housing gap is not meant to imply that the entire gap needs to be developed as set-aside units for veterans, as homeless veterans and their families are eligible for a number of different programs and housing opportunities. The estimated gap does show, however, that there continues to be a need for a range of new housing options for veterans – including units for both men and women as single individuals and family units - with a continuum of services available to help them stabilize in housing.

Programs and Resources for Veterans in King County

Three agencies provide or fund the majority of veteran-focused services in King County. They are: 1) the U.S. Department of Veterans Affairs; 2) the Washington State Department of Veterans Affairs; and 3) the King County Veterans Program. These agencies provide an array of financial, education and employment assistance, health care, case management, and housing related services, as well as other specialty services for veterans. In addition, many experienced community based organizations and non-profits throughout King County are helping people in need, including veterans, to secure housing and emergency services. These community based and grass roots organizations are especially integral to engaging what is termed “VA-resistant” veterans who avoid programs offered by the VA or other government-affiliated programs.

Together these agencies provide, either directly or through contract, a range of services targeted exclusively to veterans, including:

- Veteran’s Outreach and Eligibility Determination
- Primary and Mental Health Services / Dental Care / Rehabilitation / Convalescent and Respite Care
- Substance Abuse / Chemical Dependency
- Education and Employment Supports
- Legal / Criminal Justice Services
- Emergency Services
- Housing and Homeless Supports.

To fund this range of housing and services, partners rely on a variety of federal, state and local dollars including resources from the HUD, VA, and at the local level, King County's Veterans Relief Fund and Veterans and Human Services Levy. As is the case for nearly all community resources targeted to our region's neediest residents, the need outstrips availability.

Unique in the nation, the King County Veterans and Human Services Levy is a tax payer supported property tax raising about \$13 million per year, half of which is dedicated to assisting veterans, reservists, members of the national guard, and their families. The infusion of funding from the King County Veterans and Human Services Levy has greatly increased the number of permanent housing units set aside for homeless and at-risk veterans and their families in King County. As of July 2010, there were 261 units of permanent housing with supportive services set aside for veterans. For the three year period from 2008 through 2010, King County has also benefitted from the receipt of federal resources, including 330 Veterans Affairs Supportive Housing (VASH) housing subsidy vouchers and other special allocations of non-elderly disabled Section 8 Vouchers awarded to local housing authorities, a portion of which are dedicated to disabled (or eligible veterans) and their families through KCHA's Housing Access Services Program (HASP) program.

Still, there exists a housing gap relative to need among currently homeless veterans and homeless veteran families, and it is important to bear in mind that this gap is anticipated to grow as more veterans return from the current conflicts and need housing assistance. The veteran populations who need this assistance may also be changing. For example, we may need more housing for women and families, as well as more senior housing as our veterans age.

Challenges to Providing Housing and Supportive Services to Veterans in Need

While there has been successful collaboration among funders and providers in creating housing and supportive services for veterans to date, systemic challenges remain. Issues that need to be addressed as local partners work together to support the reintegration needs of veterans and their families and end homelessness among our region's veterans include:

- *Resources, programs and funds are insufficient. Those that exist are not consistently aligned and are coming under increasing pressure due to government budget reductions.* King County is fortunate to currently have federal, state and local dedicated funding sources for veteran housing and services. While these entities have affirmed a commitment to ending homelessness among veterans, they are all coming under increasing pressure due to the budget reductions faced by every level of government during this current economic cycle. In addition, historic fund restrictions, eligibility guidelines, and strategies for some of these sources continue to drive current programming and policies. These policies and restrictions are not always well aligned with emerging strategic plans and best practices, and it can be challenging to coordinate resources. This coordination and alignment is critical not only to address the housing gap for homeless veterans, but to ensure that our existing and perhaps reduced future resources for housing and services for veterans are effective.
- *Housing gap for homeless veterans.* There continues to be a need for a range of new homeless housing options for veterans – both for men and women as single individuals and options for families - with a continuum of services needed to help veterans stabilize in housing. This gap is anticipated to increase by approx. 100 units per year as newly returning veterans from OIF and OEF face considerable challenges in reintegrating to civilian life if considerable prevention efforts are not in place.

- *Access to appropriate housing and services is challenging.* The system of housing and supportive services available to veterans is complex. Many veterans as well as housing and service providers noted that not only are there not enough services and housing, it is difficult to access those services that do exist.
- *Service levels are not clearly connected to level of need.* Service levels vary widely across providers and are not consistently directed towards those with the highest level of need. In an era of scarce resources, it is important to assure that staff and funding are prioritized towards the most vulnerable and those strategies that achieve the best results.
- *Lack of data on homeless veterans.* Very little is known about homeless/at-risk veterans' trajectory into homelessness. Providers and planners often rely on anecdotal information when developing housing and services to meet the needs of current veterans as well as the anticipated needs of newly returning veterans.

Appendix A provides a weblink to a comprehensive report with documented research on veterans and their needs, a description of programs and agencies taking the lead to provide housing and services to these veterans and their families, and challenges these partners face in coordinating their efforts.

Six Pillars to End Homelessness among Veterans in King County

The advisory group was first convened in the fall of 2010. Through a series of meetings, the advisory group adopted a set of six key pillars to serve as the framework for the Five Year Plan. The pillars, with additional background research, can be found in Appendix B. These pillars were selected to align with the U.S. VA, VA-Puget Sound, and WDVA five year plans, each of whom organized their respective plan around the same set of pillars, in recognition that it will depend on collaboration among all levels of government and across all sectors to end veteran homelessness. See Appendix C for highlights from each of these partners' five year plans.

Subject Matter Experts from within the advisory group and King County DCHS staff spent the winter of 2010 researching veteran needs and services within the context of these six pillars. Each pillar includes a needs statement, descriptions of some of the programs in King County serving veterans within that pillar and the policies and plans that guide their work, followed by recommended action steps specific to that pillar. The following provides a brief explanation of each of pillar and why each is an important consideration in efforts to end veteran homelessness and recommended action steps to address the need.

1. Outreach to Veterans / Veterans' Education. Returning to civilian life for many veterans brings considerable challenges, requiring outreach and intervention strategies that identify and connect veterans with tailored services to aid in the transition. Veterans may also need additional training and education to obtain living wage jobs in an economy and marketplace that is very different from the military experience they leave behind.

Action Steps: Strengthen re-entry efforts to help veterans and their families better prepare for reintegration to civilian and family life. Identify opportunities to provide critical time intervention among newly-exiting veterans to inform them of services and benefits available through the VA, WDVA, KCVP and other community based agencies. Enhance data collection to better understand veteran's use of partner systems and trajectory after discharge.

2. Treatment. A disproportional number of veterans who are homeless (most who served during the Vietnam era) have significant mental health and substance abuse needs. Veterans returning from OIF/OEF likewise face a number of mental health problems, chemical dependency issues, and physical traumas, particularly those who have experienced combat. The timely availability of proper diagnosis and treatment is vital for these veterans' successful reintegration to civilian and family life.

Action Steps: Assure that veterans have access to proper and timely diagnosis and treatment options, and actively engage them and their families in treatment where necessary. Strengthen linkages between community-based mental health and treatment providers and the VA-Puget Sound.

3. Prevention. According to a number of national studies conducted by the VA and other research organizations (Rand, 2008) increasing numbers of veterans returning from the Iraq and Afghanistan wars experience PTSD, TBI and chronic pain. Many veterans, especially those who entered the military directly from high school, are now entering a job market in which they find they lack marketable skills. The impact of multiple deployments, especially among National Guard members with families, is a particularly difficult issue for active duty military, resulting in a dramatic increase in the need prevention services. Many veterans do not apply for veterans' benefits that could assist with reintegration due to the complexities of the veteran system and lack of knowledge about available benefits. These issues will require non-traditional prevention strategies to help veterans and their families successfully reintegrate to civilian life and avoid homelessness

Action Steps: Increase understanding of the impact of deployments and military service upon veterans and their families. Use this data to develop tailored approaches to prevent veterans and their families from becoming homeless, with an emphasis on increasing linkages between community based agencies and veteran programs, matching the strengths of the various organizations providing prevention and veteran services.

4. Housing and Supportive Services. Veterans are disproportionately represented among people who are homeless. These veterans and their families will require a comprehensive array of housing and supportive services to achieve housing stability. Currently, however, not only are there not enough services and housing, it can be difficult to access the housing and services that do exist due to eligibility criteria, program compliance requirements, and transportation needs, with some veterans resistant to accessing VA-affiliated housing and services. Housing planners with King County estimate up to 770 new units are needed to house our veterans who are currently homeless in King County. Planners anticipate this figure will grow, perhaps by as much as 100 per year, as veterans from OIF/OEF struggle to return to civilian life.

Action Steps: Increase the number of housing units available to veterans and their families. Support the use of quality assessment tools to identify veterans' service needs and use this data to develop and make available necessary supportive services connected to housing, matching strengths across the housing and community-based systems and veteran supports. Support flexibility in fund use and program policy to create the types of housing and services needed to end veteran homelessness.

5. Employment / Income / Benefits. Multiple factors affect a veterans' ability to obtain employment or other sources of income and benefits. Veterans' jobs may disappear during their deployment, and the unemployment rate for veterans exceeds the national average.

Additionally, veterans may return with special needs that affect employment. The application process and eligibility criteria for veterans' benefits to help them through this period of transition are complex and can be hard to navigate.

Action Steps: Encourage employment strategies to be a component of re-entry planning. Identify the reasons why veterans' unemployment rates are higher than the general population and strengthen linkages between employment and housing programs and veteran agencies to engage veterans in workforce development activities. Promote policy changes to allow for more flexible use of funds to fill gaps in employment services, including the development of supported-employment options for homeless veterans and veterans with special needs (such as TBI and PTSD).

6. Community Partnerships. Ending veterans' homelessness will require extensive collaboration among community partners, with resources from federal, state, and local governments and community-based organizations. The King County region has multiple large-scale partnerships with whom the Five-Year Plan will need to align to increase the effectiveness of the Plan.

Action Steps: Strengthen / Create partnerships across systems. Seek to match the strengths of the various main stream housing systems with the appropriate veterans' system counterpart to better to collaborate on housing and services to veterans. Support increased flexibility in the use of funds and policy directives across the various systems; support policy and funding directives driven by veterans' needs, not by historic fund and policy restrictions.

Overarching Recommendations of the Five Year Plan Based on the Six Pillars

Based upon the recommended action steps contained within the six pillars, the advisory group developed a set of four overarching recommendations to guide implementation of the Five Year Plan action steps. The four overarching recommendations are a synthesis of the themes common to the recommended action steps across one or more of the six pillars. They are:

1. Secure Adequate Funding and Work with Partners Towards System Reform. The system of housing and supportive services available to veterans is complex. Many veterans, as well as housing and service providers, note that not only are there not enough services and housing, it is difficult to access those services that do exist. Opportunities to streamline and improve services to veterans include:
 - A. *Advocate for additional resources and support changes in federal, state and local policy* to remove barriers to effective services among veterans. Examples include:
 - Advocate for additional funding at the federal state and local level even during this time of budget reductions to government funding, and apply for grant funding as resources become available.
 - Advocate to better align funding priorities among VASH, Grant Per Diem and local capital housing dollars.
 - Advocate for reinstatement of federally-funded monthly stipends during school breaks under the GI Bill for veterans who are enrolled in community colleges and universities.

- B. *Use of a coordinated approach to housing and services* so any veteran calling a community based agency, or any level of the veteran service system, will be appropriately referred into a coordinated benefit and service delivery system. Special attention should be given to the use of common assessment elements to match the level of need with the level of service and assure that scarce resources are targeted towards the appropriate population.
 - C. *Build capacity among all agencies serving veterans* so case managers and program managers are trained in the unique skills needed to best support veterans, as well as the unique challenges faced by the newly returning veterans. Housing agencies must demonstrate competence in providing services to veterans, sensitive to veterans' needs and unique culture, and veteran agencies must demonstrate competence in navigating housing and social services.
 - D. *Enhance data collection* so more is known about the challenges faced by veterans and the outcomes of the services being provided for veterans. Agencies providing housing and supportive services in King County should participate in Safe Harbors and collect agreed upon data elements to support this need for better understanding and reporting on the challenges and successes of King County veterans.
2. Close the Housing Gap for Homeless / At-Risk Veterans. There is a housing gap to support the 1,000 to 1,150 veterans who are homeless in King County. This housing gap is expected to increase by approximately 100 per year as veterans from OIF and OEF return / relocate to King County and face considerable challenges reintegrating to civilian life. The projected housing gap for current and projected returning veterans in King County over the next five years should be addressed by a combination of the following:
- A. Increased development of dedicated permanent housing with supportive services for veterans and their families.
 - B. Increased use of rental subsidies and other vouchers to secure existing private market housing for veterans and their families, as well as to help with operating support of newly developed housing.
 - C. Matching the level of need with the level of service and type of housing to assure that scarce resources are targeted towards the appropriate households.
 - D. Development and use of interim housing strategies to engage homeless veterans and put them on the path towards housing stability.
3. Address complex needs among veterans, starting with outreach and prevention. The current generation of newly returning veterans face unique challenges that require tailored approaches. Today's veterans face issues such as PTSD, TBI, Military Sexual Trauma and Chronic Pain. They return to civilian life at a time of slow job growth. WDVA staff report that nearly 50 percent of those returning from OIF/OEF are reservists (as opposed to career military) which brings with it even more significant reintegration challenges for them and their families. It is therefore recommended that:
- A. Local partners respond with intensive community outreach and services specifically targeted to the needs of these veterans, with a strong element of peer support.
 - B. Prevention strategies, such as emergency rental assistance or routine assessment among recently discharged personnel for PTSD, MST, TBI and other risk factors, be enhanced to better identify veterans at risk of becoming homeless and direct them to appropriate services.

4. Identify and Replicate Best Practice Models for Serving Veterans. Best practice models need to be developed and funded which take into account the differing needs of the aging veteran population as well as the newly returning veterans. There are veteran demonstration projects in the beginning stages of development, such as the HUD demonstration project currently being implemented by Catholic Community Services and the VA. This demonstration project should be thoroughly evaluated to identify the impact and replicable practices, particularly as it relates to an integrated approach of blending the strengths of community based agencies working closely with the veteran serving systems.

Specific action steps that might be undertaken by local and national partners to further these overarching recommendations can be found within each of the six pillars, available as a whole in Appendix B.

A matrix of the various programs and services available throughout King County, and organized by the six pillars, is available in Appendix D: Matrix of Veteran Services in King County.

Appendices

Appendix A: Veteran Needs, Housing and Services In King County

Appendix B: The Six Pillars of the Five Year Plan

Appendix C: Alignment with Federal, State and Local Plans to End Homelessness among Veterans

Appendix C(1): U.S. VA Five-Year Plan to End Homelessness among Veterans

Appendix C(2): USICH Plan to Prevent and End Homelessness

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Appendix C(4): WDVA Plan to End Veteran Homelessness across Washington State

Appendix D: Matrix of Programs and Services Targeted to Veterans in King County

Appendix E: Advisory Group Members and Key Informants



Veterans Needs, Housing and Services in King County

Prepared by:
King County Department of Community and Human Services
February, 2011

available as a weblink at:

www.kingcounty.gov/xxxxxxx

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Appendix B: The Six Pillars of the Five Year Plan

Pillar #1: Outreach to Veterans / Veterans' Education

1. Needs Statement:

Returning to civilian life for many veterans brings considerable challenges, requiring outreach and intervention strategies, tailored to individual needs that identify and connect veterans with appropriate services to aid in the transition. In addition, veterans may need additional training and education to obtain living wage jobs in an economy and marketplace that is very different from the military experience they leave behind.

A. Outreach:

- Many veterans do not apply for veterans benefits for which they are eligible. Many veterans do not apply for veteran benefits. There are various reasons for this, for example they are: 1) unaware of benefits for which they are eligible, 2) overwhelmed by the process of reintegrating with civilian life, 3) overwhelmed by the complexities of the VA system and the difficulty in getting to VA-Puget Sound service locations, or 4) actively avoiding the veteran system and refusing help from government-based veterans' services. Reaching out to these veterans is critical in order to end Homelessness among Veterans in five years.
- Mainstream providers may lack the capacity to identify and appropriately serve veterans. Few mainstream providers are well versed in the specific needs of veterans. Community based case managers may benefit from a basic understanding of common behavioral effects of PTSD, TBI, and MST, and basic knowledge of veterans benefits and referral mechanisms to the local VA and WDVA in order that veterans may receive the benefits to which they are entitled.
- Lack of data on Veterans' reintegration experience. Veterans face many challenges in reintegrating with civilian life, but not much is known on the reintegration experience. Additional data is needed to understand veterans and their families' trajectory towards stability or into homelessness.

B. Education:

- Veterans may lack marketable job skills and require education/retraining. Individuals often enter the military directly after high school to access opportunities for training and income not available in civilian life. Once leaving the military, however, many find that acquired job skills don't translate to the general employment market, and struggle to assimilate in the civilian world.
- Changes in the economy may require new job skills. National Guard/Reserves who had jobs before active duty may find, upon returning to civilian life, that their jobs have been eliminated. Given these circumstances, education or retraining may be a necessary step towards life stability.
- Policies within the GI Bill make it hard to use the benefit. Many veterans are unable to complete their degree due to policies under the GI Bill. Current policies cap tuition reimbursement based on the average cost of public university, meaning that those enrolled in private colleges or more expensive state universities must take out student loans. In addition, veterans are ineligible to receive the monthly living stipend during school breaks, meaning that veterans must try to string together a series of temporary jobs to carry them over summer or winter break.

2. Policies/Plans:

- A. The Veterans and Human Services Levy Service Improvement Plan (SIP) identifies both outreach and education/training as a main strategy. Objectives identified in Strategies 1, 2, and 3 of the SIP include reaching geographically disbursed veteran populations, outreach efforts to higher needs homeless populations, offering training to staff who assist veterans on accessing VA benefits and understanding Post Traumatic Stress Disorder to name a few.
- B. Partners for Veteran Supportive Campuses is a Memorandum of Understanding (MOU) developed by the WDVA to provide information and assistance to Washington State institutions of higher education and training programs in order to support returning Iraq and Afghanistan veterans who enter these institutions. This MOU includes the WDVA, the Office of the Governor, Washington Military Department, the Higher Education Coordinating Board (HECB), State Board for Community and Technical Colleges, Workforce Training and Education Coordinating Board, Independent Colleges of Washington, Council of Presidents, and Washington Association of Community and Technical Colleges.
- C. VA-Puget Sound Homeless Care Line has a number of MOU's with non-profits and Housing Authorities to provide support, outreach, and collaboration between the VA and partner organizations to better serve veterans (see also Community Partnerships pillar)
- D. VA's Community Homelessness Assessment, Local Education, and Networking Groups (CHALENG) is a nationwide initiative in which VA medical center and regional office directors work with other federal, state, and local agencies and nonprofit organizations to assess the needs of homeless veterans, develop Action Plan to meet identified needs, and develop directories that contain local community resources to be used by homeless veterans.

3. Program Description:

The following program descriptions are highlights of just some of the programs in existence in King County serving veterans under the umbrella of Pillar #1/Outreach to Veterans and Veterans Education. See Strategic Matrix for more detailed information on programs throughout King County.

A. Outreach

- VA-Puget Sound has a number of outreach and education programs, including a) A *National Call Center* for homeless veterans to ensure that homeless veterans or veterans at-risk for homelessness have free, 24/7 access to trained counselors; b) *Community-based outreach* in 16 strategically placed locations to identify homeless veterans where they are most likely to be found. Locations in King County include homeless housing programs in Seattle, Shoreline, Renton; Vet Centers in Seattle and Shoreline; and KCVP satellite locations. c) *Community Stand Downs* which are 1-3 day events that offer a safe and secure environment where veterans can obtain food, shelter, clothing, and a range of other types of assistance, including VA provided health care, benefits certification, and linkages with other programs; d) *MHR RTP* program partners with HCHV to provide outreach, engagement and networking activities at various sites in the greater Puget Sound area; and e) a *Veterans Justice Outreach Coordinator* has been hired to provide outreach, engagement, and coordination to homeless veterans involved in the court system.
- King County Veterans Levy: The Levy funds a number of programs that combine outreach, education/training, housing, and employment including the following programs operated by the WDVA: *King County Veterans Hotline* that provides a local resource referrals to homeless and at-risk veterans; the *Veterans Incarcerated Program* provides support services to overcome circumstances that may lead to misdemeanor activities, such

as unemployment, homelessness, and/or substance abuse and can advocate for reduced sentencing and early release; and *King County Veterans Reintegration Services* reaches out to veterans with complex needs such as chronic homelessness, addiction issues, marginal job skills and mental illness throughout rural King County including financial assistance, employment services, housing placement, and screening to ensure they have accesses Federal disability benefits through Social Security and Veterans Administration programs. The Levy directly contracts with several non-profit service providers, including Valley Cities Counseling to provide Outreach and Military Trauma screening through King County Public Health. This outreach is provided throughout King County to locate, and connect Veterans and their families to eligible benefits and services.

- Outreach to Service Providers WDVA has developed a 3 hour presentation that includes Federal, State and County programs for eligible veterans and actively seeks opportunities to educate local social and human services providers to increase awareness of resources available to King County residents who honorably served their country.

B. Education

Two very significant education supports for veterans are the VA's Post-9/11 GI Bill which provides financial support for education, training, and housing to honorably discharged individuals with at least 90 days of aggregate service on or after September 11, 2001, and/or individuals discharged with a service-connected disability after 30 days. VA's Montgomery GI Bill (MGIB) is available to those who enlist and serve in the U.S. Armed Forces.

4. Action Plan:

- A. Support discharge and re-entry efforts for newly-exiting veterans to better inform them of services and benefits available through the VA, WDVA, KCVP and other community based agencies. Identify opportunities to provide critical time intervention services to these newly discharged veterans and their families.
- B. Support efforts to engage veterans participating in other systems. Examples include the creation of Vet Centers at community colleges, and other emerging efforts to connect with veteran participants of the courts/legal system, treatment programs, and homeless housing programs. Provide basic training and support to partners on how to better support veterans within their systems, recognize symptoms of PTSD, MST, TBI and how to refer veterans to veteran benefits specialists and services.
- C. Replicate programs with documented success in reaching out to hard-to-serve veterans who actively avoid services and engage them in stabilizing supports, such as the THRIVE and REACH programs which are described in the Strategic Matrix.
- D. Enhance data collection among partner systems to better understand veteran's use of partner systems and trajectory after discharge.

Pillar #2: Treatment

1. Needs Statement:

- A. A disproportional number of all homeless veterans have significant mental health and substance abuse needs. Nationally, up to 45 percent of homeless veterans suffer from some type of mental illness. Studies show that up to 70 percent of homeless veterans suffer from substance abuse problems, with considerable overlap between mental illness and substance abuse disorders.
- B. Significant percentage of newly returning veterans display complex mental health and treatment needs. Veterans returning from Operation Iraqi Freedom / Operation Enduring Freedom (OIF/OEF) face a number of mental health problems, chemical dependency issues, and physical traumas, particularly those who have experienced combat. There appears to be a delay in seeking services, however, and not much is known about their trajectory through the VA or human services system after discharge. We do know that approximately 1,000 OIF/OEF veterans return to King County each year and will continue to do so for the foreseeable future. Among Persian Gulf veterans and early OIF/OEF veterans, 33 percent seek VA -specialty services, with most seeking services for the first time nearly four years after initial discharge. Factors include:
 - Post Traumatic Stress Disorder (PTSD) It is estimated that up to 19 percent of current war veterans have post-traumatic stress disorder (PTSD) or depression.
 - Traumatic Brain Injury (TBI). Just over 19 percent report experiencing TBI during deployment. According to a 2008 report looking at OIF/OEF veterans who reported a probable TBI, 57 percent had not been evaluated by a physician for brain injury.
 - Military Sexual Trauma (MST). MST appears to be on the rise, and is estimated to impact one in three women and one in 10 men in the military. In a survey taken in 2008 of 3,757 military personnel, 152 individuals reported they had been sexually assaulted in the military, but one-third did not report the incident.
 - Domestic Violence. According to the VA, male veterans with PTSD are two to three times more likely than veterans without PTSD to engage in intimate partner violence and more likely to be involved in the legal system.
- C. Veterans may not recognize symptoms, seek treatment, or can be improperly diagnosed. Those who have PTSD may not admit they have it or seek out treatment for five to 10 years after the trauma occurred. Among those who had been diagnosed with mental disorder, less than 40% sought mental health care, and there was a high rate of concern about stigma / other barriers to care.
- D. An increasing number of families of veterans require mental health services. There is a growing body of research on the impact of deployment and trauma-related stress on military families, particularly on wives and children.
- E. The veteran population, as a whole, is aging, resulting in emerging health and care needs. Collectively, the majority of veterans in King County are those who served in Vietnam, Korea and WWII. This population is aging, resulting in an increase in the volume and complexity of healthcare and mental health services needed in King County.

2. Policies/Plans:

- A. King County Veterans' Program treatment policy provides qualified veterans and their families case management and financial assistance support, information, and referral for life stability services, including medical, mental health, and addiction treatment;
- B. King County's Veterans and Human Services Levy Service Improvement Plan, addresses treatment needs for the most vulnerable of King County's population, including veterans in three strategies: Strategy 1, Enhancing services and access for veterans, military personnel, and their families, Strategy 2: Ending Homelessness through outreach, prevention, permanent supportive housing, and employment, and Strategy 3: Increasing access to behavioral health services.
- C. Regional Support Network (RSN) through Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD). MHCADSD serves as the RSN for King County for the provision of mental health and chemical dependency services. Services include: mental illness and drug dependency services, co-occurring treatment, crisis services, community mental health treatment, employment and housing options for MHCADSD clients, client and family resources, recovery, advocacy, prevention, intervention, and community organizing. MHCADSD offers mental health services to veterans through several of their existing projects; approximately 4% of their MHCADSD client base are veterans. MHCADSD is guided by many of the policies and funding from Substance Abuse and Mental Health Services Administration (SAMHSA). In 2010, SAMHSA has released eight strategic initiatives to guide their work for the next four years. The third strategy is a specific strategy on assisting military families in recognition of the impact of military service on veterans' spouses and families.
- D. Washington State 2010 Returning Service Members, Veterans and Their Family Members Policy Academy Action Plan This plan, developed as a result of a SAMHSA sponsored Policy Academy, helps articulate the Washington State Department of Veterans Affairs goal to synchronize and integrate ongoing efforts in the state of Washington by inspiring the development of a coordinated veteran plan.

3. Program Description:

The following program descriptions are highlights of just some of the programs in existence in King County serving veterans under the umbrella of Pillar #2/Treatment. See Strategic Matrix for more detailed information on programs throughout King County.

- A. VA- Puget Sound: Offers qualified King County veterans' medical, mental health, and addiction treatment at two medical centers, one located in Tacoma, the other located in Seattle, as well as specific programs for homeless veterans.
 - *Primary care and medical treatment* is available for homeless veterans at Compass Center, William Booth, Lazarus Center, and Shoreline Veterans Housing. Shelter staff are assisted with veteran specific health related issues.
 - *VA Mental Health Services* include Mental Health Intensive Case Management (MHICM) program, and the Psychosocial Rehabilitation and Recovery Center (PRRC) which provide services to homeless veterans with serious mental illness.
 - *VA's Addiction Treatment Center (ATC)* provides addiction treatment and shelter beds for homeless veterans who fail their toxicology tests and are not permitted into clean and sober programs, located at the Salvation Army's William Booth Center.
 - *Partnership in Health Improvement Through Shared Information (PHISI)* is a large consortium of community health and social service agencies devoted to establishing a shared electronic medical record system to improve the care for the "safety net" population, many of whom are homeless.

- B. Washington Department of Veterans Affairs (WDVA), through contracts from King County Veterans Programs and funded by the Vet's Levy, provides Post Traumatic Stress Disorder treatment for veterans and their families as well as Trauma Training for Professionals program provides training for mental health professionals in trauma-informed care, military and veteran culture, and PTSD treatment.
- C. Public Health Seattle-King County provides behavioral health and community health clinics through King County Safety Net Consortium members to veterans and their dependents. Clinics are run by HealthPoint, Valley Cities Counseling and Consultation, Harborview Medical Center, University of Washington Department of Psychiatry, and the Seattle Indian Health Board;
- D. King County MHCADSD Programs. MHCADSD programs with veteran set asides include: *Forensic Intensive Supportive Housing (FISH)* Program which provides supportive housing, using a housing first approach; includes a commitment that at least 18 out of 60 participants must be homeless veterans diagnosed with mental illness (funded by the Vet's Levy). *Forensic Assertive Community Treatment (FACT)* Program requires that a minimum of 3 out of 50 participants must be U.S. military veterans (funded by the Vet's Levy); Sound Mental Health is the lead agency. *THRIVE* is a program exclusively for homeless vets with mental illness and co-occurring disorders. MHCADSD contracts with multiple providers for this project, with Community Psychiatric Clinic (CPC) serving as the lead agency.
- E. King County Veterans Levy: The Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) offers counseling that teaches depression-management techniques to older adults who experience minor depression. From 2008-2009, 51 percent served were veterans or spouses of veterans.
- F. Project THRIVE (Treatment, Housing, Resources and Interventions for Veterans Empowerment) offered by Community Psychiatric Clinic (CPC) in partnership with numerous community agencies, and funded through a very competitive five-year SAMHSA grant. THRIVE provides a continuum of services for homeless veterans, including a new veteran's resource center and services in supported housing for homeless veterans with dual disorders of mental illness and chemical dependency. CPC will be providing 45 units of supported housing initially for the project and will construct a new housing facility for homeless vets by the end of year three. By the end of the fifth year, 380 homeless veterans will be engaged into services, 275 will receive resource center services, and 105 will receive services in supported housing.

4. **Action Plan:**

- A. Support efforts to engage veterans participating in mental health and treatment systems, and enhance linkages between community-based mental health and treatment providers and the VA-Puget Sound.
- B. Support efforts to assure that veterans have access to proper diagnosis and treatment options, informed by their military service and veteran status.

Pillar #3: Prevention

1. **Needs Statement:** Newly returning veterans face a range of complex needs as they reintegrate to civilian life, and may need assistance in preventing a fall into homelessness
 - A. Reintegration Challenges. According to a number of national studies conducted by the VA and other research organizations (Rand, 2008) increasing numbers of veterans returning from the Iraq and Afghanistan wars experience post traumatic stress disorder (PTSD) and traumatic brain injury (TBI). Many veterans, especially those who entered the military directly from high school, are now entering a job market in which they find they lack marketable skills. The impact of multiple deployments, especially among those National Guard members with families, is a particularly difficult issue for active duty military, resulting in a dramatic increase in the need for housing stabilization assistance. Many veterans do not apply for veterans' benefits that could assist with reintegration due to the complexities of the veteran system and lack of knowledge about available benefits. These issues will require non-traditional prevention strategies to help veterans and their families successfully reintegrate to civilian life and avoid homelessness
 - B. Employment/ Education Barriers. Veterans and their families experience a high rate of unemployment and economic distress. VA supported educational programs are resulting in record numbers of Veterans who enroll in higher education programs. Concurrently, high numbers of veterans fail to complete education programs due to the re-integration issues faced by the Veterans. Colleges, technical schools and other continuing education institutes are not equipped to effectively serve the needs of newly returned veterans. There is a shortage of veteran friendly work-study, internships and other course related programs.
 - C. Housing Affordability. With the high cost of housing in most areas of the County, the ability of low-income residents to keep their housing in the midst of financial emergencies (medical costs, illness, job loss or transition, etc.) becomes increasingly compromised. According to a military representative from the Washington National Guard Family Program, financial assistance is often one of the greatest needs of military members, including currently deployed and recent veterans and their families. Short-term rent or mortgage assistance may allow individual and families the opportunity to recover and stabilize their situation and avoid possible further decline into homelessness.
 - D. Lack of Data on Veterans' Risk Factors for Becoming Homeless. Veterans experience many of the same risk factors as the general population that leads to homelessness. They may also have additional factors including traumas, injuries, and instability from deployments that need to be addressed. Planners often rely on preliminary data and anecdotal evidence to study how specific risk factors influence the veteran's trajectory into homelessness. Due to new funding requirements to track veteran status at the local and federal levels, more data is becoming available. Providers and planners are beginning to gain valuable information to guide policy decisions and community response for new housing and services to meet the needs of current veterans as well as the anticipated needs of newly returning veterans.
2. **Policies/Plans:**
 - A. VA's Five-Year Plan to End Veterans Homelessness (announced 2009) and Opening Doors, United States Interagency Council on Homelessness (announced 2010). With these two plans, the federal government has made prevention one of its main strategies to keep at-risk veterans safely housed through supportive services, increased access to housing, employment, income supports, and health services;
 - B. Washington State 2010 Returning Service Members, Veterans and Their Family Members Policy Academy Action Plan This plan, developed as a result of a SAMHSA sponsored Policy Academy, helps articulate the Washington State Department of Veterans Affairs' goal to synchronize and integrate ongoing efforts in the state of Washington by inspiring the

development of a coordinated veteran production plan incorporated into each county's 10-year Homeless Plan, reflecting the commitments from local housing networks.

- C. Veterans' Relief Fund. RCW 73.08010 provides the policy direction to each county in Washington to use this dedicated tax millage to provide emergency support to low income veterans through means such as rental, mortgage, and utility payment assistance. The King County Veterans Program administers these funds for King County.
- D. Ten Year Plan to End Homelessness in King County identifies prevention as one of its main strategies and lays out plans to work with mainstream systems to ensure that people are not discharged into homelessness from local hospitals, the jails, sobering centers, mental health programs and foster care;
- E. King County's Veterans and Human Services Levy Service Improvement Plan (SIP) set a goal of ending homelessness through prevention by providing short-term rental and mortgage assistance to homeless, low-income renters and homeowners through the Housing Stability program.

3. **Description of Programs Targeted to Veterans:**

The following program descriptions are highlights of just some of the programs in existence in King County serving veterans under the umbrella of Pillar #3/Prevention. See Strategic Matrix for more detailed information on programs throughout King County.

- A. King County Veterans Program (KCVP) Short-term financial assistance and case management is available to low-income veterans, reservists and National Guard members, and their families so that they can resolve immediate financial crises and achieve economic stability. Longer-term assistance in the form of assessment and case management is also provided, including monitoring the veteran's progress towards building a more stable life with a focus on employment, housing and linking them with the VA for needed treatment and benefits.
- B. Housing Stability Project (HSP) is a primary homelessness prevention program in King County. The program provides emergency financial assistance for rent, mortgage, or move-in costs to low-income residents of King County who are in danger of losing their housing. The project has a contract obligation to serve a minimum of 230 veteran households among its annual household goal of 620, and includes a direct referral process for veterans whereby KCVP staff can place eligible clients into appointments reserved specifically for vets at HSP partner agencies. HSP also coordinates directly with the VA to help veterans that have obtained a VASH voucher; HSP can help veterans become current on back rent or move-in costs, after which the VA steps in with the voucher to assure longer term housing stability.
- C. Landlord Liaison Program provides supports and rental deposit assistance to help individuals obtain private sector housing and increase their stability over time. LLP receives funding through the VHS Levy for eviction prevention and risk reduction funds to assist veterans enrolled in the program.
- D. Housing and Services Program (HASP) is a tenant-based voucher program offered by King County Housing Authority. Both the VA and the King County Veterans Program belong to the County-wide consortium and refer veterans to the Housing Authority for a HASP voucher, available to disabled veterans who are either homeless or at risk due to rent burden. The HASP consortium also funds housing search and stability assistance, as well as crisis intervention services provided through the YWCA to help HASP participants remain successfully housed.
- E. WDVA Veterans Call Center operated by the WDVA through KC Levy funds. WDVA operates a local call center for veterans to engage veterans and advise them of resources for which they may be eligible to help stabilize their housing situation.

F. Emerging Federal Programs A number of new programs focused on prevention are coming out of the federal government:

- The *Veterans Homeless Prevention Demonstration (VHPD) project* is a HUD multi-region (King, Pierce, Thurston, Kitsap and Snohomish), three-year pilot project designed to provide early intervention to recently discharged veterans and their families to prevent homelessness. Catholic Community Services of Western Washington has been awarded the \$2 million project, which is being administrated by HUD.
- The *National Call Center for Homeless Veterans* is one of the main entry points for homeless veterans and their families, and veterans at-risk of homelessness, to access a referral system linking them with VA and community-based resources.
- The *Supportive Services for Veterans and their Families* will contract with community-based organizations to provide a range of supportive services including case management, budgeting, Legal services, housing counseling, and temporary financial assistance to veterans and their families residing in or transitioning to permanent housing. Services are intended to promote housing stability among very low-income Veteran families.

4. **Action Plan**

- A. Increase understanding of the impact of deployments and military service upon military spouses and families, and support the availability of services for veteran's families.
- B. Engage "VA-Resistant" veterans within the mainstream homeless, mental health and substance abuse systems and educate the mainstream providers on how to link these veterans to local Veterans Service Officers who can help them to access the veteran's benefits for which they are eligible.
- C. Increase capacity and understanding among mainstream homeless housing providers of veterans-specific service and housing needs.
- D. Enhance data collection among mainstream homeless, mental health and substance abuse providers of veterans' military experience to better understand veterans' trajectory to homelessness.
- E. Increase capacity and understanding among veteran-specific service providers of homeless prevention, including building capacity on emerging best practices for case management related to prevention supports and opportunities to share data across systems.
- F. Support strategies to enhance education and employment programs targeted to veterans as a means to prevent their becoming homeless.
- G. Encourage the use of thorough assessment among recently discharged personnel for earlier identification of PTSD, MST, TBI and other risk factors for becoming homeless. Support integration of data sharing on veterans' risk factors for becoming homeless across system boundaries.
- H. Match the strengths of the various organizations providing prevention and veteran services to better to collaborate on housing and services to veterans.

Pillar #4: Housing and Supportive Services

1. **Needs Statement:** Veterans are disproportionately represented among people who are homeless as demonstrated by the statistics given below. These veterans will require a comprehensive array of housing and supportive services to achieve housing stability.
 - A. Veterans are disproportionately represented among homeless. Among single adult males who are currently homeless, approximately 21 percent are veterans in King County, with an average age of 51 (veteran males comprise approximately 7 percent of the general population.) Female veterans make up approximately 4 percent of all homeless single adults, and homeless veteran families about 3 percent, according to the agencies reporting into Safe Harbors Homeless Management Information System in 2009. Housing providers anticipate there may be a shift in these numbers towards younger men, more women and more families as newly returning veterans and their families travel the trajectory towards homelessness.
 - B. Complex needs among homeless veterans. Adding to the complexity of veterans' housing needs are the diverse issues affecting homeless veterans, including mental illness, substance abuse, unemployment, criminal justice involvement, and military linked traumas such as post-traumatic stress disorder (PTSD), military sexual trauma (MST), and traumatic brain injury (TBI). In addition, the veteran population as a whole is aging, resulting in emerging health and care needs that may put them at risk of becoming homeless.
 - C. Lack of housing, coupled with difficult access to appropriate housing and services, is challenging. Housing planners with King County estimate 610 to 770 new units are needed to house our homeless veterans in King County. The system of housing and supportive services that is available to veterans is complex. Not only are there not enough services and housing, it can be difficult for veterans as well as service providers to access the housing and services that do exist due to eligibility criteria, program compliance requirements, transportation needs, and certain populations of veterans being resistant to accessing VA-backed services and housing.
 - D. Service levels are not consistently connected to level of need. Service levels and case management practices vary widely across homeless housing and veteran service providers and the most intensive services are not consistently matched with those with the highest level of need. In an era of scarce resources, it is important to assure that staff and funding are prioritized appropriately towards the most vulnerable and toward those strategies that achieve the best results.
 - E. Resources, Programs and Funds Are Not Consistently Aligned. Complex fund restrictions across federal, state and local housing and homeless programs, including eligibility guidelines and performance requirements, drive current programming and policies. These historic policies and restrictions are not always well aligned with emerging strategic plans and best practices as it relates to veteran and homeless housing programs, and it can be challenging to coordinate resources.
 - F. Lack of Shared Data on Homeless Veterans. Locally, little is known about homeless/at-risk veterans' trajectory into homelessness, although record keeping within the local Homeless Management Information System (HMIS) on veterans served is improving due to new requirements by local and federal funders. Local providers and planners often rely on anecdotal information when developing housing and services to meet the needs of currently homeless veterans as well as the anticipated needs of newly returning veterans. Nationally, data on homeless veterans is available through the U.S. Department of Veterans Affairs' Northeast Program Evaluation Center. There is a need to more effectively share the data that exists, as well as enhanced data collection and analysis.

2. Policies/Plans:

- A. Ten-Year Plan to End Homelessness in King County. Since 2005, King County and local partners have been implementing the Ten-Year Plan to End Homelessness in King County, called A Roof over Every Bed. This effort has set in motion a number of initiatives, including the *United Way of King County's Campaign to End Chronic Homelessness* and the *Homeless Families Initiative*, both of which will affect veterans in King County.
- B. King County's Veterans and Human Services Levy Service Improvement Plan (SIP). The SIP identifies as the main goals: to reduce homelessness; reduce emergency medical and criminal justice involvement; and increase self-sufficiency both for veterans and military personnel in need and their families, and as a result has numerous programs/projects in place that support increasing housing and services for veterans and their families in need.
- C. Emerging Strategic Plans at the Federal, State and Local Level to End Veteran Homelessness. Strategic plans focused on ending veteran homelessness are being developed at multiple levels, including a) the *Federal Government's Five-Year plan to End Veterans Homelessness*; b) the *local VA Five-Year Plan response* and *WDVA's Five-Year Plan Response*, both of which will contain strategies that align with the Federal governments plan, and c) *King County's Five Year Plan to End Veteran Homelessness*.

3. Description of Programs Targeted to Veterans:

Since 2005, beginning with the implementation of the Ten-Year Plan and the Veterans and Human Services Levy, the King County region has increased the number of set aside beds and/or units of housing specifically designated for veterans and their families. These units, along with housing units that existed before 2005, provides for a range of housing and services targeted specifically to veterans and their families. The following program descriptions are highlights of just some of the programs in existence in King County serving veterans under the umbrella of Pillar #4/Housing and Supportive Services. See Strategic Matrix for more detailed information on programs throughout King County.

- A. Permanent Supportive Housing - rental housing for homeless persons whose need for long-term housing case management is accompanied by an array of intensive and comprehensive services (typically delivered on-site) in order to maintain their residency. 172 units and/or beds of permanent supportive housing dedicated to veterans are available throughout King County. This figure represents new units developed since 2005, the beginning of the Ten-Year Plan to End Homelessness.
- B. Service Enriched Housing - rental housing for homeless persons who need moderate to low level of supportive services. Services are not required as a condition of tenancy, and are often provided off site and through referral. 59 units and/or beds of service enriched housing dedicated to veterans and their families is available throughout King County, with the majority of units focused in south and east King County. This figure represents new units developed since 2005.
- C. Transitional Housing - time-limited housing, generally from three to 24 months, where residents receive case management and other services to help make the transition from homelessness and permanent housing. 127 units and/or beds of transitional housing units dedicated to veterans are located throughout King County, many which are funded through the VA's Grant and Per Diem program. These units typically existed prior to the development of the Ten-Year Plan to End Homelessness.
- D. Emergency Shelter - temporary shelter from the elements and unsafe streets for homeless individuals and families. Typically does not include case management, but may include referrals to supportive services and housing. 55 beds of emergency shelter are dedicated to veterans, all of which are located in Seattle. These units existed prior to the development of the Ten-Year Plan to End Homelessness.

- E. Section 8 Housing Vouchers. Qualified veterans' have access to the Housing Access and Service Program (HASP) Section 8 vouchers with moderate case management. VA-Puget Sound and KCVP are HASP partners, and provide moderate case management and supportive services. The VA's permanent supportive housing program, HUD-VASH, provides Section 8 vouchers with medical and case management support from the VA. Over the last three years, HUD has provided funds to support VASH vouchers through KCHA and SHA for 330 homeless veterans in Seattle and King County. Allocations for 2011 are yet to be determined. Two project-based VASH voucher sites have been established in King County, for a total of 32 VASH project-based vouchers, including 7 for families.
- F. Landlord Liaison Program provides supports and rental deposit assistance to help individuals obtain private sector housing and increase their stability over time. LLP receives funding through the VHS Levy for eviction prevention and risk reduction funds to assist veterans enrolled in the program.
- G. Non-Veteran Specific Housing. There are hundreds of other shelter, transitional housing and permanent supportive beds in the community that veterans may also occupy, not necessarily because of their status as a veteran, but because they meet other eligibility criteria for those units.

4. Action Plan

- A. Increase the number of housing units targeted to high service needs veterans, including units for emerging populations such as veterans with TBI, PTSD, MST, female veterans and veteran families.
- B. Support the availability of necessary supportive services connected to housing, and re-examine the need for time limits on lengths of stay in housing and housing-related services.
- C. Support the use of quality assessment tools to match veterans with appropriate housing and services, including the use, where appropriate, of Client Care Coordination and Coordinated Entry for Families.
- D. Engage veterans who may initially be resistant to receiving services through the VA, within the mainstream homeless, mental health and substance abuse systems and educate the mainstream providers on how to link these veterans to local Veterans Service Officers who can help them to access the veteran's benefits which they are eligible for.
- E. Support more flexibility in the use of all funds directed towards ending homelessness for veterans. As noted above, the policy goal is that the availability and type of housing and services become driven as much as possible by veterans' needs, rather than by fund restrictions.
- F. Support accurate and consistent data collection on veterans' needs and military experience, including discharge status, and the elimination of any unnecessary barriers to sharing data across the veterans and mainstream homeless system to better inform the planning and policy development of veterans housing and services.

Pillar #5: Income/Employment/Benefits

1. **Needs Statement:** Multiple factors affect a veterans' ability to obtain employment or other sources of income and benefits, which in turn directly affects their ability to obtain stable housing. Specific needs of veterans include:

- A. The unemployment rate for Veterans exceeds the national average. According to the Bureau of Labor Statistics, the unemployment rate for post 9/11 veterans is higher than the overall national unemployment rate and nearly doubled in 2008 to 11.3 percent. The unemployment rate among those who were recently discharged is 18 percent, and of those who are employed, 25 percent earn less than \$21,840 per year. Among younger veterans aged 18-24, the unemployment rate is much higher, at 21 percent, as many in this age group tend to have limited education, and struggle to transfer their military skills to civilian employment. However, the U.S. Department of Labor notes that this younger cohort tend to rebound fairly quickly, and after approximately 10 months, have employment rates that are much closer to the general population. This suggests there is a critical period following military service during which increased access to employment for younger veterans (or the short term supports described in the Prevention section) could be especially beneficial.
- B. Veterans' jobs may disappear during their deployment. Returning veterans who left jobs behind while they served their country, such as those in the National Guard or Reserves, may find that their jobs no longer exist. In some cases, employers have closed, down-sized, merged or relocated their business, due to the ongoing impacts of the current recession.
- C. Veterans may return with special needs that affect employment. In addition to difficulties faced by newly returned veterans to find any employment in the current recession, some veterans also return with special needs. The increasing incidence of post traumatic stress disorder, traumatic brain injury and military sexual trauma create barriers to obtaining and maintaining stable employment for some of the newly returning veterans. Many of the older veterans who are chronically homeless have histories of substance abuse, incarceration and mental illness – possibly related to undiagnosed PTSD – that likewise pose challenges to securing basic employment.
- D. Resources, Programs and Funds Are Not Consistently Aligned. Complex fund restrictions across federal, state and local employment programs are not always well aligned with emerging strategic plans and best practices as it relates to veteran and homeless employment programs. As an example, it is challenging to meet performance requirements for homeless veterans with high performing contract standards as required by the Workforce Investment Act under the Department of Labor, which funds the majority of workforce development activities.
- E. The application process and eligibility criteria for veterans' benefits are complex. Many veterans, particularly homeless veterans, become discouraged from applying for veterans' benefits due to the complexities of the VA system and the difficulty in getting transportation to the VA service locations.

2. **Policies/Plans:**

- A. Workforce Investment Act (WIA), administered by the U.S. Department of Labor, guides the funding and availability of a range of workforce development activities available through statewide and local organizations. Activities benefit job seekers, laid off workers, youth, incumbent workers, new entrants to the workforce, veterans, persons with disabilities, and employers. In January 2009, new regulations were issued by the Department of Labor requiring all of its qualified programs to provide policies for "priority of service" for veterans and eligible spouses as part of the Jobs for Veterans Act (JVA). DOL's jurisdictions include qualified programs within the Employment Security Department (ESD) in Washington State, including programs at WorkSource Centers.

- B. Ten Year Plan to End Homelessness in King County. The Ten-Year Plan identifies the need to increase people's access to employment and to foster an understanding that people who are homeless can, and want to, work and increase access to other sustainable supports to increase people's long-term self sufficiency.
- C. King County's Veteran and Human Services Levy Service Improvement Plan (SIP). Activity 2.8 within the SIP includes the strategy "Link educational, vocational and employment opportunities to housing and supportive services".
- D. Post-9/11 GI Bill & Montgomery GI Bill. Employment opportunities are naturally linked to one's level of education. The VA's Post-9/11 GI Bill and the Montgomery GI Bill (MGIB) are available to those who enlist in the U.S. Armed Forces or Reserves. Further information on the MGIB is found in Strategy # 1, Outreach/Education.

3. **Description of Programs Targeted to Veterans:**

The following program descriptions are highlights of just some of the programs in existence in King County serving veterans under the umbrella of Pillar #5/Income, Employment and Benefits. See Strategic Matrix for more detailed information on programs throughout King County.

- A. Compensated Work Therapy (CWT) program, Supported Employment (SE) and Incentive Therapy (IT) programs. These VA programs for homeless veterans receiving HUD-VASH and/or GPD housing subsidies pay veterans an hourly rate for a select number of hours per week to participate in employment training and job search assistance programs.
- B. King County's Veterans and Human Services (VHS) Levy-funded employment programs. Three programs, funded under Strategy 2.8 of King County's VHS Levy provide employment-focused case management services, job placement assistance, access to training and work supports (e.g., work supplies, job licensing fees, union dues, etc.), to very low-income veterans with barriers to stable employment and housing.
- C. King County Work Training's Project Self-Sufficiency (Career Connections). This project offers homeless families and individuals, including veterans, wrap around services of housing, education, and employment. The focus is to obtain a post-secondary credential so that participants can earn higher wage jobs that will help them become self sufficient. The program is a partner at WorkSource Renton and helps customers access all the resources of the one-stop WorkSource employment system throughout King County. Career Connections also partners with the new Compass housing facility in Renton and provide services to homeless veterans on the Compass site.
- D. WDVA Homeless Veterans Reintegration Project and Veterans Conservation Corp program. Helps veterans (90% homeless) with employment services, including training, placement, and work supplies (e.g., tools, clothing, and equipment) as well as assistance with licensing fees and union dues. Focuses on urban centers within King, Pierce, and Thurston counties.
- E. WorkSource. The KCVP and Work Training Career Connections are partners at Renton WorkSource to better link veterans to employment services. State Employment Security Department has likewise placed veterans' employment specialists at many of the WorkSource centers in King County. These specialists, referred to as DVOPs (Disabled Veteran Outreach Program Representatives) and LVERs (Local Veterans Employment Representatives) assist veterans search the WorkSource job banks to help find jobs that match veterans' skills and connect them with additional veteran's resources to assist with other needs as necessary. Veterans Reps are available at the Rainier, Auburn, Renton, North Seattle and Redmond WorkSource Centers.

4. Action Plan

- A. Encourage employment strategies to be a component of re-entry planning, as newly returning veterans transition to civilian life. Seek to identify the reasons why younger veterans suffer from short-term unemployment upon re-entry and seek to expedite the process of obtaining employment.
- B. Engage veterans who may be initially resistant to receiving services from the VA, within the mainstream homeless, mental health and substance abuse systems and educate the mainstream providers on how to link these veterans to local Veterans Service Officers who can help them to access the veterans' benefits which they are eligible for.
- C. Develop supported-employment options for homeless veterans and veterans with special needs (such as TBI and PTSD) to help them successfully transition to the general workforce.
- D. Strengthen linkages between employment training and homeless housing supportive services for veterans. Implement emerging best practices, allow for more flexible use of funds to fill gaps in services and reduce duplication of services across systems.
- E. Encourage more awareness of this issue through supporting local efforts that help veteran job seekers such as the King County Veteran's Program "Veterans Orientation to Resources" workshops.

Pillar #6: Community Partnerships

1. Needs Statement:

Ending veterans' homelessness will require extensive collaboration among community partners, with resources from federal, state, and local governments and community-based organizations. The King County region has multiple large-scale partnerships with whom the Five-Year Plan should align to increase the effectiveness of the Plan. While most partnerships include only a few strategies or services specific to veterans, it will be important to strengthen these partnerships to leverage existing resources and expertise. Challenges include:

- A. The systems which serve Veterans are complex and difficult to navigate. Veterans and their families who are homeless or at-risk of homelessness may have complex needs which could be served through a combination of VA services with community-based healthcare, treatment, housing, employment, education, and legal systems. Too often, Veterans are unable to access the wide range of services available to them due to the complexity of navigating multiple systems coupled with individual barriers. Coordination across systems could be significantly improved, which would result in more effective service delivery, streamlined payment methods and higher quality of life for veterans.
- B. Challenges "braiding" revenue sources. Complex fund restrictions across federal, state and local housing, homeless and veteran programs often drive current programming and policies. These historic policies and restrictions are not always well aligned with emerging strategic plans and best practices as it relates to veteran and homeless housing programs, and it can be challenging to coordinate resources.
- C. Challenges sharing data. Little is known about veterans' trajectory into homelessness or their use of homeless housing and services once they do become homeless. Although record keeping is improving, data systems across housing, employment, healthcare and treatment face many obstacles to sharing data, either for technical or legislative reasons. Currently, providers and planners often rely on anecdotal information when developing housing and services to meet the needs of current veterans as well as the anticipated needs of newly returning veterans.
- D. Organizations have limited capacity. Veteran's organizations, housing, and service providers report difficulties navigating system boundaries on behalf of their clients. Community based organizations (and their case managers) may not be fully versed in the specific needs of veterans. Similarly, many veteran-specific agencies (and their case managers) might have limited networks outside of veterans' services, and are then hindered in their ability to get their veteran clients into mainstream housing and services.

2. Policies/Plans:

By the nature of this Pillar, the same policies and plans outlined in Pillars One through Five guide the policies and plans which must be considered under Community Partnerships.

- A. King County's Veterans and Human Services Levy Service Improvement Plan (SIP). Because it is veteran-specific, the SIP addresses each of the Pillars, and is described more fully in Pillars #2/Outreach and Education, #3/Prevention, #4/Housing and Supportive Services, and #5/Employment, Benefits and Income.
- B. The Regional Support Network (RSN) The RSN is described more fully in Pillar #2/Treatment. The policies of the RSN do not call out veterans as a targeted population, though many veterans do receive RSN-funded services.
- C. Ten Year Plan to End Homelessness in King County. The Ten-Year Plan is described more fully in Pillar #3/Prevention and #4/Housing and Supportive Services. The Ten-Year Plan does

not call out veterans as a targeted population, though many veterans do access housing and supportive services under the Ten-Year Plan.

- D. Federal Workforce Investment Act (WIA). WIA is described more fully in Pillar #5/Employment, Benefits and Income. WIA includes specific workforce development activities for veterans.

3. **Partnership Description:**

The following veteran-specific partnerships are highlights of just some of the partnerships that exist to coordinate veteran services in King County under Pillar #6/Community Partnerships. See Strategic Matrix for more detailed information on programs throughout King County.

- A. Seattle-King County Veterans Consortium (SKCVC) and the Supportive Housing Alliance for Veterans (SHAVETS) SKCVC is a bi-monthly meeting bringing together individuals and organizations that advocate on the behalf of homeless veterans and veterans and families at risk of homelessness. SHAVETS also meets bi-monthly, but is focused on issues on housing and supportive services only for homeless veterans.
- B. VA-Puget Sound The *Homeless Care Line* has a number of MOU's with non-profits and Housing Authorities to provide support, outreach, and collaboration between the VA and partner organizations to better serve veterans. MOU's include: Seattle Housing Authority, WDVA, Landlord Liaison Project, King County Housing Authority, YWCA HASP, Solid Ground-Santos Place, CPC- Cascade Hall, Compass Renton, Compass Pioneer Square, Plymouth Housing- Simons, Catholic Housing Services- Ozanam and SAMSHA with Project Thrive.

There are many regional partnerships working to coordinate services and maximize use of resources including:

- A. Outreach and Education
- Outreach Component: VA's *Veteran's Justice Outreach (VJO)*, King County's *Criminal Justice Initiative (CJI)*, the WDVA's *Veterans Incarcerated Project* and KCVP actively seek out to veterans to enroll them into alternative services that focus on housing and stability.
 - Education Component: *WorkSource Partnership*. Local community and technical colleges throughout King County are active partners in the WorkSource partnership.
- B. Treatment
- *Regional Support Network (RSN)*. MHCADSD serves as RSN for King County for the provision of mental health and chemical dependency services. Services include: mental illness and drug dependency services, co-occurring treatment, crisis services, community mental health treatment, employment and housing options for MHCADSD clients, client and family resources, recovery, advocacy, prevention, intervention, and community organizing. MHCADSD offers mental health services to veterans through several of their existing projects; approximately 4% of their MHCADSD client base are veterans.
 - *Public Health / Healthcare for the Homeless Network*: Much of the healthcare needs for people who are homeless are provided by Public Health / HCHN. Services and activities including Jail Health, Community Health Clinics, Respite Care in Emergency Shelter. HCHN planning efforts include targeted strategies to reach veteran populations.
- C. Homelessness Prevention – Partnership efforts within Homelessness Prevention include:
- *Housing Stability Project* and *Housing Access and Services Program (HASP)*. HSP is a network of community-based agencies who provide emergency financial assistance for rent, mortgage, or move-in costs to low-income residents of King County, including veterans, who are in danger of losing their housing. HASP is a Section 8 housing choice voucher program in partnership with KCHA, KCVP and VA, through which eligible disabled veterans access housing and some supplemental supportive services, including housing search and crisis intervention. These vouchers provide deep rental subsidy to veterans, housing many

homeless veterans, and preventing at-risk veterans from losing their housing and falling into homelessness.

D. Housing / Supportive Services

- *Committee to End Homelessness in King County*, includes the *Funders Group*, which coordinates funding priorities, and *Client Care Coordination*, an integrated effort among public health, CJI, MHCADSD, Housing Providers, and hospitals to identify high utilizers/highly vulnerable single adults and enroll them into permanent supportive housing with a resulting benefit of reducing their use of expensive systems and services such as hospitals, jails, sobering centers, etc. VA-Puget Sound/HCHV is a partner to CCC.
- *Coordinated Entry for Families* is an emerging initiative under the Ten Year Plan. Both of these systems will include the ability to identify veterans for access to veteran-specific services and benefits.

E. Income / Employment / Benefits

- *WorkSource Partnerships* coordinate workforce development activities across multiple systems to assure the availability of wrap around services of housing, education, and employment. "Veterans Reps" help veterans find jobs that match veterans' skills and connect them with additional veteran's resources. Veterans Reps are available at the Renton, Rainier, Auburn, Renton, North Seattle and Redmond WorkSource Centers.

4. **Action Plan:**

- A. Strengthen / Create partnerships across systems. Seek to match the strengths of the various main stream systems with the appropriate veteran's system counterpart to better to collaborate on housing and services to veterans.
- B. Support increased flexibility in the use of funds and policy directives across the various systems; support policy and funding directives driven by veterans' needs, not by historic fund and policy restrictions.

Appendix C: Alignment with Federal, State and Local Plans to End Homelessness among Veterans

The U.S. Department of Veterans Affairs, recognizing the growing number of veterans in need of homeless housing and services, developed in 2009 a five year plan to end veteran homelessness at a national level. Concurrently, the USICH was in the process of developing a federal plan to prevent and end homelessness across all populations, and identified veterans and their families as a specific population in need of a tailored approach. Subsequent to the release of the U.S. VA and USICH plans, state and local leaders embraced the call to develop tailored plans to end veteran homelessness within their communities. In 2010, VA-Puget Sound developed a five year plan specific to the Puget Sound region, and the WDVA crafted a plan for the balance of Washington State. CEHKC likewise included development of a Five Year Plan to End Homelessness among Veterans in King County as a priority within its 2010 workplan.

1. U.S. Department of Veterans Affairs Five-Year Plan to End Homelessness among Veterans



In November 2009, at the VA National Housing Summit held in Washington D.C., the U.S. VA introduced a plan to End Homelessness among Veterans in five years. The VA's Five-Year Plan to End Homelessness among Veterans outlines six main strategies for ending Homelessness among veterans in five years, with the understanding that the federal government cannot manage this alone, but will depend on collaboration among all levels of government and across all sectors. The key areas outlined in the plan are to provide affordable housing and permanent supportive housing, increase meaningful and sustainable employment, reduce financial vulnerability, and transform homeless services from a crisis response system to a preventive approach. For a summary of the strategies outlined at the Veterans Housing Summit regarding the Five-Year Plan to End Homelessness among Veterans, see Appendix C(1).

2. Opening Doors: the Federal Strategic Plan to Prevent and End Homelessness

In 2010, the United States Interagency Council on Homelessness released *Opening Doors: The Federal Strategic Plan to Prevent and End Homelessness*.¹ Opening Doors contains four aspirational goals: 1) Finish the job of ending chronic homelessness in the next five years; 2) Prevent and end homelessness among veterans in the next five years; 3) Prevent and end homelessness among families and youth and young adults in the next ten years; and 4) Set a path for ending all types of homelessness. The plan is based on establishing effective partnerships across multiple systems and jurisdictions towards the goal of ending homelessness; demonstrating progress in reducing chronic homelessness and expand that effort to all populations; implementing and expanding best practices throughout the continuum; and realigning existing resources. For a summary of the strategies outlined in Opening Doors, see Appendix C(2).

¹ <http://www.usich.gov/>

3. VA-Puget Sound Five-Year Plan to End Veteran Homelessness

The U.S. VA has a large presence in the Puget Sound region, with a medical facility in Seattle and another in Tacoma, together called the VA-Puget Sound. As the largest veteran medical facility in the Northwest, VA-Puget Sound serves veterans from Bellingham to Olympia, as well as from Alaska, Idaho, and Oregon. VA-Puget Sound currently serves as one of five pilot sites in the nation to implement the Homeless Prevention Pilot for OIF and OEF Veterans. The project will serve 1,900 veterans over three years, and has developed a five year plan tailored to the Puget Sound Region. The plan is built around the VA-Puget Sound Comprehensive Homeless Program and includes goals to reduce the number of homeless veterans by 21 percent by the end of fiscal year 2011.

The VA-Puget Sound five year plan, like the federal VA plan, is organized around six key pillars: 1) community outreach and education; 2) mental health and chemical dependency treatment; 3) prevention supports; 4) housing and supportive services; 5) employment, training and benefit supports; and 6) community partnerships. For a summary of the strategies outlined within the VA-Puget Sound Five-Year Plan to End Homelessness among Veterans, see Appendix C(3).

4. Washington State Department of Veteran Affairs Five-Year Plan to End Veteran Homelessness

On June 2, 2010, the WDVA held its own Veterans Housing Summit among stakeholders in Washington State who work on veteran homelessness. The goal of the event was to provide concrete ideas for the WDVA to be in a good position to acquire federal VA dollars slated for developing housing for veterans. As follow up, a workgroup was formed, consisting of staff from the WDVA, King County's Community Services Division, DCHS, local housing service providers, and others to help guide statewide planning. This workgroup has drafted a comprehensive action plan with key strategies and lead members with responsibility for implementing these strategies.

The WDVA proposes a transition in the military discharge process – changing from a briefing on exit paperwork to reintegration planning with a longer-term, preventive approach. Action plans include providing income and financial counseling and access to treatment, with particular attention paid to female veterans and families. The WDVA will pro-actively assess housing needs and respond with changes in policies (where appropriate) and acquisition of additional housing. The WDVA has identified emerging funding opportunities with plans establish key partnerships to apply for these funds. Finally, the action plan includes creating partnerships with key leaders throughout the state to serve as champions for the effort to end veteran homelessness as well as to provide direct outreach to veterans themselves to enroll them in housing and services. See Appendix C(4) for the strategies and action steps included in the WDVA Action Plan.

5. Ten Year Plan to End Homelessness in King County

In 2005, the King County region embraced *A Roof Over Every Bed: Our Community's Ten-Year Plan to End Homelessness in King County* and established the Committee to End Homelessness in King County to implement the goals of the Ten-Year Plan. The plan lays out a series of specific strategies and actions, with key strategies around prevention; rapid re-housing; better aligning housing and service systems and cross-system collaboration; building the public and political will to end homelessness; and a strong evaluation component to ensure the use of data and best practices in program design and policy development. This plan is focused on homelessness in general. The Funders Group of the CEHKC, as one of their 2010 priorities, prioritized the creation of a Five Year Plan to End Homelessness among Veterans, to be aligned with the federal and state plans. King County Department of Community and Human Services (DCHS) helped convene the advisory group and provided staffing to this effort. This report, *The Five Year Plan to End Homelessness among Veterans in King County* is the culmination of that work.

Appendix C(1): U.S. VA Five-Year Plan to End Homelessness among Veterans

The Federal VA Five Year Plan will guide VA efforts across the nation towards the VA's goal of ending Homelessness among veterans. The following are excerpted highlights from Federal Strategic Plan to End Homelessness among Veterans: No Wrong Door Policy, November 2010.

- Expand existing programs and develop new initiatives
 - Increase # of housing options and variety
 - Increase supportive services (prevention)
 - Improve access to VA services
- Based on six pillars:
 - Outreach/Education
 - Treatment
 - Prevention (Very new)
 - Housing/Supportive Services
 - Income/Employment/Benefits
 - Community Partnerships.

Highlights of some of the pillars

Outreach and Education

- Supportive Services for Low Income Veteran Families: includes financial assistance to prevent veterans from falling into homelessness (pay for rent, utilities)
 - '09: Program Development
 - '10: Award Grants 5,000 Veterans Served
- HUD-VA Prevention Pilot (select cities, focus on OEF/OIF veterans)
 - Provides housing and intensive case management
 - FY '10: 200-250 families served
- Homeless Registry
 - Database to track and monitor prevention and treatment outcomes
 - Dual focus on performance and outcomes
 - Beginning in FY '10- 200,000 Vets entered into registry
- National Call and Referral Center
 - Resource for homeless Vet and advocates seeking immediate assistance
 - FY '09: No formal system exits
 - FY '10: 15,000 vets served.

Prevention

- Loan Guarantee Foreclosure Notification Initiative
 - Trigger warning if Veteran is in danger of losing home due to foreclosure
 - 125 Days to serve claims
- Vocational Rehabilitation Services
 - If someone is in the program, can help minimize or slow down foreclosure.

Housing/Supportive Services

- HUD-VASH
 - FY '09: 20,000 / FY '10: 30,000
 - Project-based vouchers and Housing First vouchers
 - Seattle as demonstration pilot project
- Grant Per Diem
 - 1500-2000 additional beds
 - FY '09: 18,000 Vets served
 - FY '10: 20,000 vets served
- Overall
 - One size doesn't fit all
 - Case management models-to fit best needs of Veteran
 - Encourage project-based-those who need more structured and families, rural-focused
 - Case management: housing focused and targeted to those returning from recent wars
 - > critical time interventions, first nine months
 - > motivational interviewing
 - > rapid re-housing.

Appendix C(2): USICH Plan to Prevent and End Homelessness

Opening Doors, the Federal Strategic Plan to Prevent and End Homelessness, released by USICH in 2010, will guide national efforts throughout HUD, the VA, Labor, HHS and other federal departments towards the common goal of ending homelessness throughout the nation. The following are excerpted highlights from Opening Doors.

Four Aspirational Goals:

1. Finish the job of ending Chronic Homelessness in the next five years
2. Prevent & end Homelessness among Vets in the next five years
3. Prevent & end Homelessness among Families & YYA in the next ten years
4. Set a path for ending all types of homelessness

Plan is based on:

- Partnerships across multiple jurisdictions and systems: Private, Public (Federal, State, Local) Philanthropy, Faith, HUD, VA, HHS, Labor, Education, etc.
- Progress in reducing chronic homelessness, expand that effort to all populations/needs
- Implementation /expansion of best practices, including housing PLUS supports
- Realignment of existing resources

Increase Leadership, Collaboration, And Civic Engagement

Objective 1: Provide and promote collaborative leadership at all levels of government and across all sectors to inspire and energize Americans to commit to preventing and ending homelessness

Objective 2: Strengthen the capacity of public and private organizations by increasing knowledge about collaboration, homelessness, and successful interventions to prevent and end homelessness

Increase Access To Stable And Affordable Housing

Objective 3: Provide affordable housing to people experiencing or most at risk of homelessness

Objective 4: Provide permanent supportive housing to prevent and end chronic homelessness

Increase Economic Security

Objective 5: Increase meaningful and sustainable employment for people experiencing or most at risk of homelessness

Objective 6: Improve access to mainstream programs and services to reduce people's financial vulnerability to homelessness

Improve Health And Stability

Objective 7: Integrate primary and behavioral health care services with homeless assistance programs and housing to reduce people's vulnerability to and the impacts of homelessness

Objective 8: Advance health and housing stability for youth aging out of systems such as foster care and juvenile justice

Objective 9: Advance health and housing stability for people experiencing homelessness who have frequent contact with hospitals and criminal justice

Retool The Homeless Crisis Response System

Objective 10: Transform homeless services to crisis response systems that prevent homelessness and rapidly return people who experience homelessness to stable housing

Signature Initiative #1 – Veterans

Increase collaboration at federal and local level – government and community providers – to address veteran homelessness

Signature Initiative #2 – Families

Combine Housing Vouchers with mainstream services to serve homeless/at-risk families. 6,000 Vouchers available. Must demonstrate how vouchers will coordinate these with assistance and services administered by TANF, outreach, other services.

Signature Initiative #3 – Chronic Homelessness

Connect vouchers for CH with Medicaid and wrap around services funded through SAHMSA.

Signature Initiative #4 - Youth

Workgroup to provide technical assistance to work with youth in transition, including research, best practices, replicability, etc. USICH will draft a framework for a pilot project to address the housing/service needs of youth in transition.

Development of the Plan

USICH charged to develop “a national strategic plan” to end homelessness with enactment of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act in May 2009.

The Council affirmed six core values to be reflected in the Plan:

1. Homelessness is unacceptable.
2. There are no “homeless people,” but rather people who have lost their homes who deserve to be treated with dignity and respect.
3. Homelessness is expensive; it is better to invest in solutions.
4. Homelessness is solvable; we have learned a lot about what works.
5. Homelessness can be prevented.
6. There is strength in collaboration and USICH can make a difference.

Plan is guided by key principles. It should be:

1. Collaborative
2. Solutions-driven and evidence-based
3. Cost-effective
4. Implementable and user-friendly
5. Lasting and scalable; and
6. Measurable, with clear outcomes and accountability
7. Transparent – with multiple opportunities for input from researchers, practitioners, state and local government leaders, advocates, people who have experienced homelessness, and federal agency staff.

Workgroups convened to analyze specific populations:

1. Families with children
2. Youth
3. Veterans
4. Individuals experiencing chronic homelessness
5. With a fifth workgroup (Community) established as to how the federal government can better support communities, including public and private sectors, in their efforts to prevent and end homelessness.

Appendix C(3): VA-Puget Sound Five-Year Plan to End Homelessness among Veterans

The VA-Puget Sound Five year Plan to End Homelessness among Veterans will guide the local VA's efforts (and within the context of the national VA's goal) to end Homelessness among veterans. The following are excerpted highlights from VA-Puget Sound Health Care System Seattle and American Lake Five Year Plan to End Homelessness among Veterans, drafted December, 2010

- VA Puget Sound Comprehensive Homeless Program
 - Outreach
 - Grant and Per Diem
 - Administrative Support
 - Prevention
 - Contract Care
 - Justice Program
 - HUD/VASH
 - Expand existing programs and develop new initiatives
- Goals
 - FY 2011: Reduce the number of homeless veterans by 21 percent.
 - FY 2012: Serve as one of five pilot sites in the nation to implement the Homeless Prevention Pilot for OIF and OEF Veterans, serving 1,900 veterans over three years. House an additional 525 veterans even without substantial VASH allocations in FY12.
- Six Strategic Pillars
 - Outreach / Education
 - > VA National Call Center for Homeless Veterans Hotline
 - > Client Care Coordination
 - > Community outreach through 16 community-based locations
 - > Contracts for additional interim / emergency beds
 - Treatment
 - > Addictions Treatment Center – partnership / 'purchased' beds
 - > Partnership for Health Improvement through Shared Information (PHISI)
 - > VA Domiciliary or Residential Rehabilitation and Treatment Programs
 - Prevention
 - > Homeless Prevention Pilot for OIF and OEF Veterans
 - > Community based projects: Housing Stability Project, Landlord Liaison Project, County Veteran Assistance programs
 - Housing / Supportive Services
 - > Expanded use of VASH Vouchers
 - > Grant and Per Diem Program
 - > Growth of Transitional Housing beds
 - Income / Employment / Benefits
 - > Continue with Existing Programs: Compensated Work Therapy, Supported Employment, Incentive Therapy
 - > Connect veterans to available benefits
 - Community Partnerships
 - > Assure regional coverage through community partnerships
 - > Continue / strengthen community partnerships: housing authorities, community based organizations, State of Washington Veterans Affairs, Regional Support Network treatment services, criminal justice / department of corrections, public health, other community partners.

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Appendix C(4): WDVA Plan to End Veteran Homelessness across Washington State

The Washington State Department of Veteran Affairs (WDVA) Action Plan will guide efforts the WDVA's efforts across Washington State towards the goal of ending Homelessness among veterans. The following are excerpted highlights from WDVA Action Plan: 2010 Returning Service Members, Veterans, and Their Family Members Policy Academy, drafted 2010.

Strategy #1 -- Homelessness Prevention

- A. Utilize period of discharge from the military as a transition opportunity – changing from a briefing on completing discharge paperwork to a more preventive approach. WDAV will assemble a change team, with key leaders from Ft. Lewis, VA, WDVA and other stakeholders to implement.
- B. Provide Income Financial Counseling, including: employment/workforce development; education/college; emergency prevention services; information on public benefits
 - Engage Workforce Development Council and present at Governor's subcabinet on economic development and employment
 - Continue the effort to create individual college/university agreements for veteran friendly campuses (UW, Pierce College); Veteran supported campuses; Veterans Conservation Corps;
 - Create a homeless veterans SOAR initiative
 - Identify and support non-profit and community service providers in applying for VA homeless prevention fund and other NOFAs (create a technical assistance sub-group?)
- C. Assure access to appropriate treatment (trauma), with particular attention paid to the needs of Female veterans and Families
- D. Expand the Veterans Justice Outreach/Jail Diversion program to all counties. Partner with new VJO's, apply for SAMHSA veterans jail diversion grant.

Strategy #2 -- Housing Capacity for Homeless Veterans

- A. Inventory existing permanent housing targeted to veterans and identify best practices statewide.
- B. Access existing and new units
 - Access proven models: Landlord Liaison Project, Master Leasing, VA foreclosures, VASH subsidies, etc.
 - Replicate best practices
 - Partner with Public Housing Authorities, particularly around the use of VASH vouchers
 - Explore opportunities to secure foreclosures as a source of housing for homeless vets.
- C. Engage mainstream programs/systems for housing and services

Strategy #3 -- Financial/Sustainability

- A. Identify existing resources and review policy/changes needed/advocate for flexibility
- B. Review opportunities for federal, state and local funding
 - Apply for grants: VASH; SSVP (homeless prevention); Rural MH; SAMHSA Jail Diversion; VA Grant and Per Diem
 - Support county efforts to raise local funds;

- Replicate local funding strategies (e.g., King County Veterans and Human Services Levy) and county VAFs
 - Provide TA to local counties or others applying for grants
- C. Develop measures of success

Strategy #4 -- Communication and Outreach

- A. Assemble team to develop and oversee WDVA Five Year Plan, and get buy in from state and local leadership on policy, housing, systems and veterans issues:
 - Engage new planning partners/targeted outreach to public and private partners
 - Involve consumers/family advocates – consumer voice advisory board
 - Review local 10-year plans for individual commitments and focus on veterans
- B. Work with public and private agencies to identify veterans, and develop models for information sharing.
 - Explore opportunities to share data to further inform veterans housing and services.
 - Develop common data elements
 - Assure compliance with HIPAA, other privacy considerations.
- C. Conduct outreach to homeless veterans with a particular focus on rural areas. Build more community support in rural areas.
- D. Identify and engage key leaders at the state, elected officials, and local policy makers in support of ending veteran homelessness
- E. Participate in Stand downs

Appendix D: Matrix of Programs and Services Targeted to Veterans in King County

Matrix of Programs and Services Targeted to Veterans in King County									
#	Pillar	Implementation Actions	Department / Agency	Contact Person	Funding Source	Objective	Description	Measurement Outcome	Timeline Scheduled / Completed
1	Outreach / Education	King County Veterans Information and Assistance Line	Washington State Department of Veterans' Affairs	Frank Dickinson	VHS Levy	Provide information and referrals to veterans and their families to connect them to entitled benefits and services.	Toll free call line providing information and referrals to veterans and their families on entitled health benefits, employment services, reintegration assistance, family and emergency services, and housing assistance. Available from 8:00 am to 5:00 pm, Monday-Fridays, with calls returned if messages left after operating hours.	# of persons applying for and/or receiving needed serves after referral by the dedicated phone system	12/2010-2011
1	Outreach / Education	King County Veterans Program- Satellite branches	King County Veterans Program	Fred Steele	VHS Levy	Expand the geographic range of services provided by KCVP outside of Seattle.	Two staff persons are dedicated to meeting with veteran clients at eight additional satellite locations in Carnation, Enumclaw, Federal Way, Maple Valley, Kirkland, Lake City, Redmond, and Auburn. This expansion of services to veterans who live outside the City of Seattle allows veterans and families to be better served with KCVP services.	% of new, unduplicated veteran clients served (not served previously by KCVP)	07/2008-2011
1	Outreach / Education	PATH Outreach Team	Sound Mental Health	Katy Miller	VHS Levy, and federal funding	Connect or reconnect homeless persons in South King County to services and housing.	The PATH outreach team seeks and engages homeless adults in South King County, with a priority on those who have been homeless for a long time and may have mental health, substance abuse, and other problems. Previously clients were served by the mobile medical van, now clients are directly referred to community clinics. (veterans served by this program doubled from 2008 to 2009, with 22 veterans served in 2009)	# of veterans connected to various services and show positive outcome	Existed as a federally funded program initially, but expanded with VHS Levy funds in 10/2007-2011
1	Outreach / Education	REACH Project	Evergreen Treatment Services	Katy Miller	VHS Levy, other funding sources	Develop expanded outreach and engagement for high utilizers and chronically homeless veterans in Seattle to reduce risk and use of expensive services.	A program already in existence prior to the additional funds from the VHS Levy, REACH engages the most vulnerable, unsheltered individuals in Seattle, including chronically homeless veterans, and has one outreach worker specifically designated as the Veterans Outreach Specialist and connects them with housing and services, including helping them receive benefits and entitlements. (16% served in 2009 were veterans)	1) # of veterans receiving services; 2) # of veterans improving their housing situation; 3) # of veterans maintaining permanent or permanent supportive housing	Program existed prior to VHS Levy funds, but additional funds added staff, from 06/2008-2011
1	Outreach / Education	National Guard Military Outreach Specialist	Washington State Department of Veterans' Affairs	Ric Price	VHS Levy	Reduce the impact of service on members and families of U.S. National Guard and Reserves.	Program provides outreach services to U.S. National Guard and Reserve members, veterans, and their family members.	# of veterans provided referrals to benefits and support services	09/2009-2011
1	Outreach / Education	Veterans Incarcerated Program	Washington State Department of Veterans' Affairs	David Green	VHS Levy, RCW	Assist incarcerated veterans to overcome factors contributing to jail use and promote long term health and stability upon release	VIP project aims to reduce veterans' use of King County and suburban jails by identifying veterans in jails and advocating on their behalf. They provide support services to overcome circumstances that may lead to misdemeanor activities, such as unemployment, homelessness, and/or substance abuse. They can advocate for reduced sentencing and early release. WDVA staff provides intake, assessments, advocacy and case management to veterans in jail.	1) # of veterans achieving early jail release, 2) # of jail days saved due to veterans' early release, & 3) # of released veterans that do not recidivate	04/2007- 2011
1	Outreach / Education	Women and Minority Veterans Outreach Program	Community Psychiatric Clinic/YWCA	Diane Burnett, CPC, and Margie Haywood, YWCA	VHS Levy, other sources through YWCA	Increase access to veterans' benefits and services for populations that are traditionally underserved.	Outreach program focused on underserved veteran communities of color and women veterans to link them to veteran benefits, and other benefits and services in a culturally appropriate manner.	# of clients reporting satisfaction with outreach services	07/2010-2011

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#	Pillar	Implementation Actions	Department / Agency	Contact Person	Funding Source	Objective	Description	Measurement Outcome	Timeline Scheduled / Completed
2	Treatment	Forensic Intensive Supportive Housing (FISH)	Sound Mental Health- MHCADSD- FISH	Dave Murphy	VHS Levy, other sources	End homelessness for vulnerable at-risk veterans and families by providing resources that improve their ability to secure and maintain permanent housing.	FISH clients are chronically homeless, are mentally ill, and have come in contact with the legal system. FISH provides clients with permanent supportive housing and services over a 5-year period for up to 60 individuals annually. The FISH team is mobile and delivers services in community locations rather than expecting the client to come to the clinic or program site. (29% served in 2009 by FISH were veterans)	# of veterans who move into housing and then retain it for at least six months	04/2009-2011
2	Treatment	Housing Health Outreach Team	Neighborcare Health; HealthPoint	Trudi Fajans	VHS Levy and other funding sources	Help formerly homeless people to retain housing.	The team consists of medical, mental health, and chemical dependency providers who help clients establish a regular health care regimen, rather than relying on costly emergency care. (16% served in 2009 were veterans)	# of veterans served by this program	Program existed, but VHS Levy funds added health practitioner and nurse, 01/2008-2011
2	Treatment	Post-Traumatic Stress Disorder treatment for veterans and their families	Washington State Department of Veterans' Affairs	Pat Lemus	VHS Levy	Reduce the symptoms and impacts of PTSD on the lives of veterans and their families.	The WDVA contracts with qualified counselors throughout King County to provide PTSD counseling and treatment for veterans and their dependents who have been assessed for and found to have PTSD.	# of clients with reduced symptoms of PTSD and depression	04/2007-2011
2	Treatment	Program to Encourage Active, Rewarding Lives for Seniors (PEARLS)	City of Seattle Aging and Disability Services, Catholic Community Services	Linda Wells	VHS Levy, other sources	Improve the mental health status and independent housing stability of vulnerable elderly veterans, their partners, and other elderly persons.	Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) is a counseling program that teaches depression-management techniques to older adults who experience minor depression. (51% served from 2008-2009 were veterans or spouses of veterans)	# of enrolled veterans who show improvement in depression assessment scores (based on pre/post services)	2008-2011
3	Prevention	Employment Assistance	King County Veterans Program	Fred Steele	VHS Levy, RCW	Improve the long-term financial stability of veterans and their families by providing access to livable wage jobs.	KCVF has enhanced services in scope and access with a presence in South County- Renton Worksource to reach veterans and their families with employment or other support they may need.	1) # of clients served at WorkSource Renton site; 2) # of veterans and assisted family members who secure employment	09/2007- 2011
3	Prevention	Financial Assistance	King County Veterans Program	Fred Steele	VHS Levy, RCW	Reduce impact of immediate financial strain on household stability by providing funds to meet basic needs and overcome financial crisis.	Qualified veterans receive financial assistance in rental or mortgage payments, utility bills and/or food vouchers.	# of veterans reporting increased financial stability of the household	11/2006-2011
3	Prevention	Housing Stability Project	King County Homeless Housing Group	Scott Mingus	VHS Levy, CDBG	End homelessness for vulnerable at-risk individuals and families by providing resources that improve their ability to secure and maintain permanent housing.	Offers grants and loans to residents of King County who are in danger of losing their homes, or who are homeless or forced to move and need assistance with move-in costs. (In 2009, HSP served 251 veterans, of 1,627 individuals served)	# of veterans remaining in their housing 6 months after they received funds from the program	05/2008-2011
4	Housing and Supportive Services	Client Care Coordination	King County- MHCADSD	Rene Franzen	VHS Levy	End homelessness for vulnerable at-risk veterans and families by providing resources that improve their ability to secure and maintain permanent housing.	The Client Care Coordination system is focused on identifying the highest need chronically homeless individuals who are high utilizers of the sobering center, jails, psychiatric centers, and/or hospitals, as well as chronically homeless individuals who are identified as highly vulnerable, but who have not utilized public services. The system has started matching the highest need individuals identified through the collaborative systems with the most appropriate housing unit/s available. (this program is for non-veterans as well as veterans)	# of high utilizers of public services and/or chronically homeless veterans added to CCC database	06/2008-2011
4	Housing and Supportive Services	Emergency shelter	King County Veterans Program	Fred Steele	RCW, VHS Levy	Reduce the impact of homelessness by providing emergency shelter to veterans through vouchers to service providers.	Beds set aside for veterans generally do not include significant case management services, but may include referrals to supportive services and housing.	# of veterans moved to more permanent housing	12/2007-2011

Matrix of Programs and Services Targeted to Veterans in King County									
#	Pillar	Implementation Actions	Department / Agency	Contact Person	Funding Source	Objective	Description	Measurement Outcome	Timeline Scheduled / Completed
4	Housing and Supportive Services	Housing Access and Services Program (HASP)	King County Housing Authority	Kristin Winkle	KC Housing Authority	Provide permanent housing to very low income, permanently disabled individuals in King County.	HASP helps permanently disabled individuals, including veterans, receive Section 8 housing vouchers issued through KCHA. KCVP and the VA are members of the consortium and are contracted for a number of vouchers to provide housing assistance and moderate case management. (this program is available to non-veterans as well as veterans)	# of homeless veteran clients leased up and remain in housing	2000- on-going; Currently, HASP is suspended until 3rd quarter of 2011 due to lack of turnover of vouchers
4	Housing and Supportive Services	Housing Referrals and Assistance	King County Veterans Program	Dylan Frazier	VHS Levy, RCW	Reduce the impact of homelessness by providing supportive housing for veterans who are homeless or at risk of homelessness and providing additional services as needed.	Lead social workers assist homeless veterans with referrals to transitional and/or permanent housing with necessary support services.	# of veterans who move into and retain housing for six months	06/2007-2011
4	Housing and Supportive Services	Landlord Liasion Program	YWCA	Katy Miller	VHS Levy, Homeless Housing & Services Fund (HHSF), UWKC, City of Seattle	End homelessness for vulnerable at-risk veterans and families by providing resources that improve their ability to secure and maintain permanent housing.	The LLP reduces barriers to entering permanent housing for homeless persons and provides supports to help them maintain housing and increase their stability over time. The LLP provides support to help landlords mitigate the impacts of reducing entrance criteria in order to house homeless persons, who have screening barriers due to past evictions, poor credit, and/or criminal histories that prevent them from obtaining affordable housing in the private rental market. (19% served in the LLC in 2009 were veterans)	# of veteran tenants housed through LLP	1/2009-2011
4	Housing and Supportive Services	Permanent supportive housing units/beds set aside for veterans	Varies by project	Katy Miller/John deChadenes	Varies by project, but can include: V&HS Levy; KC Homeless Services and Capital Funding, Tax Credit Equity; MIDD, UWKC, VA, SAMHSA, MHCADSD, various city contributions in KC; State Housing Trust Fund; housing voucher programs, Jumpstart	Provide high needs and/or chronically homeless veterans and families with stabilizing services such as housing, treatment, and intensive case mangement.	Units and/or beds have been developed specifically for veterans in permanent housing facilities, and include comprehensive case management, medical and wellness, mental health, substance abuse, vocational/employment, and life skills. Permanent supportive housing projects also have enhanced 24 hour front desk staff on site. This includes both capital funds and funds for services.	# of units and/or beds of permanent supportive housing for veterans	2007-2011
4	Housing and Supportive Services	Service-Enriched housing units/beds set aside for veterans	Varies by project	Katy Miller and John deChadenes	Varies by project, but can include: VA, RCW, VHS Levy, WA Housing Trust Fund, ARCH, Tax Credit Equity	Permanent rental housing for homeless households that need moderate- to low-level of services. Services are not a condition of tenancy.	Units and/or beds developed specifically for veterans accompanied by moderate to low level supportive services. This includes capital and services funding.	# of units and/or beds of service enriched permanent housing for veterans	2009-2016

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#	Pillar	Implementation Actions	Department / Agency	Contact Person	Funding Source	Objective	Description	Measurement Outcome	Timeline Scheduled / Completed
4	Housing and Supportive Services	Transitional housing units/beds set aside for veterans	King County- DCHS, and other funding sources	DCHS and VA staff	Varies by project, but can include: VA, RCW, Salvation Army, WDVA, HUD-Section 8, MOD Rehab, City of Seattle, HUD-McKinney, MIDD and others	Reduce the impact of homelessness by providing transitional housing to veterans through vouchers to service providers.	Units and/or beds set aside for veterans in transitional housing, accompanied by supportive services such as case management, information and referral, life skills training, and tenant education. This includes capital and services funding.	# of veterans moved to more permanent housing	On-going
5	Income / Employment / Benefits	Link educational, vocational and employment to housing and supportive services	King County- Community Services Division	Scott Mingus	VHS Levy	Improve the housing stability of at-risk and formerly homeless individuals by overcoming health and related barriers to securing and retaining employment.	This program serves homeless or formerly homeless individuals, and are very low income, who experience multiple barriers to stable employment and housing. Program includes employment focused case management services, assessment, job readiness, search and placement assistance, referrals for additional services, benefits planning, and retention services. (26% served in 2009 were veterans)	# of veterans enrolled; % of veterans who show increased participation in paid employment and/or employment activities; # of veterans placed in a job or training program	08/2008-2011
6	Community Partnerships	Homeless Management Information System- Safe Harbors	City of Seattle Department of Human Services- Community Services Division Safe Harbors HMIS	Sola Plumacher	KC, City of Seattle Human Services Department, United Way of KC	Increase participation of regional services agencies in the new HMIS application by providing agency-level technical support to improve data quality and business processes, and to configure custom applications.	Safe Harbors HMIS is the region's management information system for services for people who are homeless and is a requirement for receiving enhanced levels of U.S. Department of Housing and Urban Development (HUD) McKinney Vento funding, and State homeless service funding. The county-wide homeless Continuum of Care is comprised of 251 programs and 8,478 beds serving families and individuals that could participate in the HMIS (excluding domestic violence programs), and as of 1-1-08, 170 with 7,341 beds (86.7% of all beds) were participating in Safe Harbors.	# of agencies reporting into Safe Harbors- HMIS	01-08- on-going
6	Community Partnerships	Interagency agreements between King County and Veterans Organizations	King County Housing Finance	KC Contract Manager	KC	To improve access between veterans' organizations in King County with housing agencies to better serve veterans.	Agency agreements between King County and the Housing and/or Service agency, ensures any veteran referrals are given priority by the main veterans' organizations (WDVA, KCVP, and the VA).	# of interagency agreements formed between veterans organizations and housing agencies	
6	Community Partnerships	King County's Committee to End Homelessness	DCHS Staff, City of Seattle, United Way of King County, others	Bill Block/Gretchen Bruce	City of Seattle, KC, United Way of KC, Gates Foundation, Local housing authorities, Building Changes	CEH is a broad coalition of government, faith communities, nonprofits, the business community and homeless and formerly homeless people working together to implement the Ten-Year Plan to End Homelessness in King County.	CEH is being implemented through three primary policy entities: a Governing Board made up of more than 20 influential leaders providing high-level oversight; A Consumer Advisory Council, comprised of people who are currently homeless or who have experienced homelessness in the past; an Interagency Council, consists of executive director and department director level personnel from many of the entities working to end homelessness in King County and provides insight into needed changes to current programs and identifies ways to better serve people experiencing homelessness. Another group, the Funders Group, focuses on implementation strategies, made up of representatives of public and philanthropic entities who provide major funding to housing and homeless services.	1) Reduction in the number of people who are unsheltered or in the shelter system as compared to the same geographic area a year ago; 2) # of dedicated homeless housing units secured system-wide	2005-2015
1, 2	Outreach / Education; Treatment	Mobile Medical Unit	Public Health- Seattle & King County Health Care for the Homeless	John Gilvar	VHS Levy	Connect or reconnect homeless persons in South King County to needed medical and support services through expanded mobile capacity, assessment, and referral to services.	The mobile medical van holds regular clinics in Federal Way, Kent, and Auburn, and includes outreach workers to build rapport and engage with homeless people. The mobile medical van screens new clients and connects them to a local community health center for follow-up and primary care. Services also include linking clients to medical benefits, housing, mental illness or addiction issues or other common needs. (14% served in 2009 were veterans)	1) # of veterans assessed and referred to health and mental health services; 2) # of veterans successfully linking and receiving primary care or mental health services	11/2008-2011

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#	Pillar	Implementation Actions	Department / Agency	Contact Person	Funding Source	Objective	Description	Measurement Outcome	Timeline Scheduled / Completed
1, 2	Outreach / Education; Treatment	Trauma Training for Professionals	Washington State Department of Veterans' Affairs	Pat Lemus	VHS Levy and other funding sources	Expand access for trauma victims and veterans to appropriate and best practice mental health treatment and support services.	Program provides training for mental health professionals in trauma-informed care, military and veteran culture, and PTSD treatment.	1) # of individuals educated about trauma and delivery of appropriate services; 2) # of new service providers, and referrals of clients to trauma treatment services; 3) # of primary care providers, behavioral health and substance abuse systems, and housing support providers who can identify and address trauma and PTSD in both the veteran and non-veteran populations	6/2009-2011
1, 5	Outreach / Education; Income / Employment / Benefits	Veteran Conservation Corp Program	Washington State Department of Veterans' Affairs	Mark Fischer	VHS Levy	Improve the long-term financial stability of veterans and their families by providing access to livable wage jobs.	Provide job placement, employer training, and individual training services in energy conservation and management, environmental restoration and stewardship for eligible veterans and other military personnel.	# of veterans placed in jobs, apprenticeships, internships, or training opportunities and able to retain them for up to 12 months	08/2008-2011
1, 6	Outreach / Education; Community Partnerships	Seattle-King County Veterans' Consortium meetings	City of Seattle	Arlene Oki	Staff support- City of Seattle, KC, Solid Ground	To share information and build relationships between veterans' organizations and other providers of services to veterans.	Group meets every other month, third Thursday of the month, and covers a number of veteran related topics, with participation from veterans' service orgs, vets orgs, funders, etc.	1) # of members consistently attending meetings; 2) # of new members added to the listserv	On-going, meets every other month
1, 6	Outreach / Education; Community Partnerships	Supportive Housing Alliance for Veterans (SHAVETS) meetings	King County and Housing/Supportive Service agencies in King County	TBD (formerly Kathy Gerard)	Staff support- KC, VA, Compass Housing	To share information and build relationships between housing agencies, supportive service agencies, and veterans' organizations.	Group meets is every other month, third Monday of the month, centered around housing and supportive services for veterans.	1) # of members consistently attending meetings; 2) # of new members added to the listserv	On-going, meets every other month
4, 5	Income / Employment / Benefits; Housing and Supportive Services	Homeless Veterans Reintegration Project	Washington State Department of Veterans' Affairs	Kathy Nylen and Dennis Brown	VHS Levy, RCW	Improve the lives of vulnerable, homeless veterans by helping them attain and maintain a stable life.	The HVRP program helps veterans (90% homeless) with employment services, including training, placement, and work supplies (e.g., tools, clothing, and equipment) as well as assistance with licensing fees and union dues and focuses on urban centers within King, Pierce, and Thurston counties.	#s of veterans retaining jobs for 90 days and retaining housing for at least 60 days	04/2007-2011

Appendix E: Advisory Group Members

To the Five Year Plan to End Homelessness among Veterans in King County

Vets 5-Year Plan advisory group (Entity)	Member
Committee to End Homelessness	Bill Block
United Way of King County	Neil Powers
City of Seattle	Judy Summerfield
VA-Puget Sound Homeless Care Line	Kathy Gerard
WA Dept of Veterans Affairs (WDVA)	Dennis Brown
Catholic Community Services	Lisa Gustaveson
King County Housing Authority	Kristin Winkel
Seattle Housing Authority	Christopher Wright
South King County	Scott Swaim, Valley Cities/WDVA
East King County	Rachel Mathison, St. Andrews Housing Group
Vets Housing Provider	M.J. Kiser, Compass Housing Alliance
King County Veterans' Program (KCVP)	Dylan Frazier
KC Mental Illness & Drug Dependency	Andrea LaFazia
Veteran-Community Network	Sheila Sebron and Vera Brooks
KC Veteran's and Human Services Levy	Debora Gay, Team Coordinator
KC Homeless Housing Group	Katy Miller, Cheryl Markham
Vet 5-Year Plan King County Workgroup	Bill Block, Linda Peterson, Debora Gay, Katy Miller, Scott Mingus, Janice Hougen, Deborah Kuznitz, Gretchen Bruce
Vet 5-Year Plan Staffing Team	Debora Gay/Team Coordinator, Deborah Kuznitz, Janice Hougen Gretchen Bruce

Subject Matter Experts to each of the Pillars

Pillar #1: Outreach and Education: Dennis Brown, Kathy Gerard, Sheila Sebron, Scott Swaim

Pillar #2: Treatment: Kathy Gerard, Lisa Gustaveson, Andrea LaFazia, Scott Swaim

Pillar #3: Prevention: Kathy Gerard, Lisa Gustaveson, Judy Summerfield, Kristin Winkel

Pillar #4: Housing and Supportive Services: Dylan Frazier, Katherine Gerard, Janice Hougen, MJ Kiser, Cheryl Markham, Rachel Mathison, Neil Powers, Christopher Wright, Rocco Bagala and Paul Mocha (VA-Puget Sound)

Pillar #5: Employment / Income / Benefits: Bill Block, Dennis Brown; Dylan Frazier, Katy Gerard, Sheila Sebron, Frank Pratt (VA-Puget Sound)

Pillar 6: Community Partnerships: Bill Block, Vera Brooks, Lisa Gustaveson, Kathy Gerard, MJ Kiser, Judy Summerfield

Additional Key Informants to Research and Programmatic Information

Alan Castle – Low Income Housing Institute

Joel Estey – King County DCHS

Tracy Jones – Compass Housing Shoreline

Donald Lachman – WDVA

Arlene Oki – City of Seattle Human Services Department (retired)

Roger Shands – Santos Place